County: <u>Sedqwick</u> Fraction NW SE SE NW	Sec7T28_S_R2
CORRECTION(S) TO WATER WELL COMP	LETION RECORD (WWC-5)
Owner: McConnell AFB (to rectify lacking or incorrect in	information)
Location was listed as:	Location changed to:
Section-Township-Range: None Given	7-285-2E
Fraction (¼ ¼ ¼):	NW SE SE NW
Other changes: Initial statements:	
Changed to:	
Comments: Zebra technical Services	s LLC is a division of
Cascade Drilling, KS Lic. No	
	> " 2) /
Verification method: Latitude & longitude, R  and mapping tool on KG5 w  Submitted by: Kansas Geological Survey Data Resources Library 1930 Cor	ebsite,
	initials: DRL date: 12/20/2016
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Corto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jacks	Dealer 1170., 247701100, 110 000 775 720

WATER WELL R		orm WWC-5		ision of Water	ST.17.	Wall ID	
Original Record		Change in Well Use		urces App. No.		Men ID	
1 LOCATION OF W		Fraction		tion Number	Township Numb		
	wick	1/4 1/4	1/4 1/4		T S	R DEDW	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
Business:  Address:  Mc Connell AFB  direction from nearest town or intersection): If at owner's address, check here:							
Address: McConnell AFB							
City: State: ZIP:							
3 LOCATE WELL	4 DEPTH OF	COMPLETED WELL	. <b>&gt;</b>	5 Latitud	a. 37 h295h	52 (4	
3 LOCATE WELL WITH "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 6f. Depth(s) Groundwater Encountered: 1)							
SECTION BOX:	(1 - 1) $(1 - 1)$ $(1 - 1)$ $(1 - 1)$ $(1 - 1)$ $(1 - 1)$ $(1 - 1)$ $(1 - 1)$ $(1 - 1)$ $(1 - 1)$ $(1 - 1)$				4 IVNAD 83 I NAD 27		
WELL'S STATIC WATER LEVEL:							
	below land surface, measured on (mo-day-yr). 10/16			GPS (unit make/model:)			
NW NE		surface, measured on (mo-d		(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			
		Well water was					
W		Well water was		☐ Onli	ine Mapper:	***************************************	
SW SE		hours pumping			17.19 41		
	Estimated Yield:	gpm	_	6 Elevation	m: // // // //	. Ground Level TOC	
S	Bore Hole Diam	eter:6 in. to24				GPS  Topographic Map	
1 mile	<u> </u>	in. to	ft.				
7 WELL WATER TO BE USED AS:							
1. Domestic:		olic Water Supply: well ID			field Water Supply: 1 le: well ID	case	
☐ Household☐ Lawn & Garden		watering: how many wells? uifer Recharge: well ID			d Uncased		
Livestock		nitoring: well ID		_	mal: how many bore		
2. Irrigation		nmental Remediation: well		3 a) Clos	ed Loop  Horizon		
3. Feedlot	☐ Air	Sparge		b) Oper		ischarge Inj. of Water	
4. Industrial	☐ Rec	covery		13. 🗆 Othe	r (specify):		
Was a chemical/bacter	iological sample	submitted to KDHE?	Yes No	If yes, date s	ample was submitte	ed:	
Water well disinfected?			•				
8 TYPE OF CASING	USED: ☐ Steel	PVC Other	CASIN	IG JOINTS:	☐ Glued ☐ Clampe	d 🔲 Welded 📝 Threaded	
Casing diameter	in. to	ft., Diameter	in. to	ft., Diamet	er in. to .	ft.	
		in. Weight	lbs./ft.	Wall thickne	ess or gauge No	••••••	
TYPE OF SCREEN OR			,	[] Other	(Cassies)	•••••	
		Fiberglass PVC Concrete tile Non	e used (open hole		(Specify)	••••••	
SCREEN OR PERFOR			o doca (open note	,			
Continuous Slot	☐ Mill Slot		Torch Cut D	rilled Holes [	Other (Specify)	•••••	
☐ Louvered Shutter	Key Punched	☐ Wire Wranned ☐	Saw Cut N	one (Open Hol	e)		
SCREEN-PERFORATED INTERVALS: From							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft., From ft., From ft., From ft. to ft.							
Grout Intervals: From							
Nearest source of possibl		nal Times Die Deire		I ivantook Donn	□ Incacti	oida Stomaa	
☐ Septic Tank     ☐ Lateral Lines     ☐ Pit Privy     ☐ Livestock Pens     ☐ Insecticide Storage       ☐ Sewer Lines     ☐ Cess Pool     ☐ Sewage Lagoon     ☐ Fuel Storage     ☐ Abandoned Water Well							
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well							
Other (Specify)							
Direction from well?		Distance from	weil?				
10 FROM TO		IOLOGIC LOG	FROM	TO L	ITHO, LOG (cont.) o	r PLUGGING INTERVALS	
0 7	F111	2					
7 22	Gray C	LAY					
			Notes				
Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, preconstructed, or plugged							
under my jurisdiction and was completed on (mo-day-year)\0.12.5\\5. and this record is true to the bast of my knowledge and belief.							
under my jurisdiction and was completed on (mo-day-year)\0.\2.5\\5. and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No\0.\2.5\\5.\\0.\0.\0.\0.\0.\0.\0.\0.\0.\0.\0.\0.\0							
under the business name	. A. R. R. A. S. To s	echnical Service	<u> جــالـاب Si</u>	gnature	Vila		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.							
					tor your records. Telep		
Visit us at http://www.kdheks	.gov/waterwell/index	.ntmi	KSA 82a-12	14		Revised 7/10/2015	