WATER WELL RECORD Form WWC-5 Division of Water												
Origin 📗	nal Record	Correction	☐ Chang	e in Well Use		R	esources /	App. No.		Well ID		
1 LOCA	TION OF W	ATER WE	LL:	Fraction		5	Section N	lumber	Township Number	er Ran	ge Number	
Coun	County: Sedqwick ne 1/4 nw 1/4 nw 1/4						18	3	*			
	OWNER:			First:		Street or I	Rural Ad	dress who			distance and	
	WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and Business: McConnell AFB direction from nearest town or intersection); If at owner's address, check here:											
	Idress: 57830 Pittsburg ST Suite 120 McConnell AFB											
Address					1.		ALD.					
City:												
3 LOCA	3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:35											
WITH	"X" IN	4 DEPTE	OF COM	LLET LED M	YKLL:		π. 51	Latitude	01.015254		(decimal degrees)	
SECTION BOX: Depth(s) Groundwater Encountered: 1)										(decimal degrees)		
2)								<u>Horizonta</u>	I Datum: WGS 84	□ NAD	33 🔲 NAD 27	
									Latitude/Longitude:			
1100								GPS (unit make/model:!	HUNE)	
NW -	Pump test data: Well water was ft.								WAAS enabled?		0)	
W	W after bours pumping gpm Online Mapper:										**************	
A - SW A - SE A - SE A - SE A - SE - A - SE A - SE -												
after hours pumping gpm 6 Elevation: NA 7 Corp.									☐ Ground	Level TTOC		
	Estimated Yield:gpm S Bore Hole Diameter:gm in. to35							6 Elevation: N/A ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S Bore Hole Diameter: 6 in. to 35 ft. and Source: Land Survey									Other	10 010	hogiapine map	
111111111111111111111111111111111111111												
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Depublic Water Supply: well ID												
1. Domestic							10.	U On Fig	eld Water Supply: lea	ısc	**************	
	Household 6. Dewatering: how many wells?							11. Test Hole: well ID				
	□ Lawn & Garden 7. □ Aquifer Recharge: well ID											
Livest								Geotherm	al: how many bores?		40440	
2. Irrigat				Remediation:			•	a) Closed	Loop Horizonta	L Verti	al	
3. Feedle			Air Sparge	☐ 201	Vapor E	xtraction		b) Open :	Loop Distrace Dist	charge 📙	Inj. of Water	
4. Industrial Recovery Injection 13. Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? Tycs No If yes, date sample was submitted:												
Water well disinfected? ☐ Yes ■ No												
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other												
Casing diameter												
Casing diameter 2 in. to 25 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 0 in. Weight 15/ft. Wall thickness or gauge No. SCH #40												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From .25 ft. to .35 ft., From ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Moonest sou	aus: riom	o al management	***********	K., FIOM	,,,,,,,,,,,,,, l	L (0 ,,,,,,	, II., I	rrom	П. 10	n.		
Septic	rce of possible		on: .ateral Lines	☐ Pit	Daisn.		☐ Livesto	at. Dans	□ t	1 54		
					_	_			☐ Insectici			
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
							_ rerun2	er swrage	CI OII Mell	Jas Well		
Direction from well?												
10 FROM	TO TO		ITHOLOG		motor we	FROM	ТО			HICCINIC	INTERNATE	
o'			IINULUG	IC LUG		PROM	10	LII	HO. LOG (cont.) or I	FUGUINC	INTERVALS	
		psoil		4		-	+	-				
2	35 cl	ay tiil					+					
						Notes:						
						1						
11 CONT	PACTORS	OP LANDO	NUNEDIS	CEDTIFIC	ATION	This wat	er well n	voc Co	nstructed, recon	etweeted a	ul ulunand	
under my is	priediction on	d was comple	eted on (mo	-day-veer) 0	5-16-2018	one curre	d this res	ord is two	ie to the best of my	knowlett	· — plugged	
Kansas Wa	ter Well Cont	ractor's Lice	nse No 567	T	his Wat	er Well R	ecord wa	s comple	ted on (mo-day-yea	r) 06-14-2	018	
under the h	usiness name	of Cascade I	Ing LP		and reul		Signature	- compre	VA DI	22	3143000000	
under the business name of Cascade Drilling LP Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Burner 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.												
	://www.kdheks.					CSA 82a-1			. y - m resorant totaphin		7/10/2015	
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