

County: Sedgwick Fraction NW SW NE Sec. 18 T 28 S R 2 EW

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)

(to rectify lacking or incorrect information)

Owner: McConnell AFB

Location was listed as:

Section-Township-Range: 18-25S-2E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NW SW NE

Location changed to:

18-28S-2E

NW SW NE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Map attached to record for MFT3-MW3, other
monitoring wells nearby for same owner, and mapping tool &
aerial photos on KGS website. initials: DR date: 3/12/2015

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>	<u>NW 1/4 SW 1/4 NE 1/4</u>	<u>18</u>	T <u>25</u> S	R <u>2</u> E

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: McConnell AFB

RR#, St. Address, Box # : _____

City, State, ZIP Code : Wichita, Kansas

Board of Agriculture, Division of Water Resources
Application Number: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	1	2	3	4
5	6	7	8	9
10	11	12	13	14
15	16	17	18	19
20	21	22	23	24

4 DEPTH OF COMPLETED WELL: 31.3 ft. ELEVATION: 1350

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____

Pump test data: Well water was None ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 11 in. to 31.3 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

1 Domestic	3 Feedlot	6 Oil field water supply	9 Dewatering	11 Injection well
2 Irrigation	4 Industrial	7 Lawn and garden only	10 Monitoring well	12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No X

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded <u>X</u>

Blank casing diameter 2 in. to 15.8 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify)
				12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 <u>Mill slot</u>	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 15.8 ft. to 29.8 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 12.0 ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Cement/Bentonite

Grout Intervals: From 2.0 ft. to 9.7 ft., From 9.7 ft. to 9.7 ft., From 12.0 ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	<u>unknown</u>

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	7.0	Soil - Br Cl Dry			
7.0	10.0	Clay - Tan S: Moist			
10.0	11.0	" - " " Dry			
11.0	29.0	" - " " Moist			
29.0		Gypsum - Cl Dry			

RECEIVED JUN 15 1989

RECEIVED OCT 27 1989

DIVISION OF ENVIRONMENT

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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/11/88 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 494 This Water Well Record was completed on (mo/day/yr) _____

under the business name of Southwestern Lab by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

LEGEND

- Area Proposed for SOV Survey
- Proposed Monitoring Well Location
- Proposed Soil Boring Location

SCALE 0 400 FEET