

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			
W	NW	NE	
		X	
E	SW	SE	
S			

4 DEPTH OF COMPLETED WELL: 29.0 ft. ELEVATION: 134.6

Depth(s) Groundwater Encountered 1. 19.0 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 1.5.6 ft. below land surface measured on mo/day/yr 12/12/88

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: 1.1 in. to 29.0 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
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)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____
<u>2 PVC</u>	4 ABS	7 Fiberglass		Welded _____ Threaded <u>X</u>

Blank casing diameter 2 in. to 14.0 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 3.1 in., weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40

6 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)

7 SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<u>3 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)	

8 SCREEN-PERFORATED INTERVALS: From 14.0 ft. to 29.0 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 10.6 ft. to 29.0 ft., From _____ ft. to _____ ft.

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

Grout Intervals: From 2 ft. to 8.6 ft., From 8.6 ft. to 10.6 ft., From _____ 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	3.0	Soil - Br Cl			
3.0	4.5	Clay - DK Br S. Dry			
4.5	19.0	" - " " " Moist			
19.0	25.0	" - " " " Saturated			
25.0	29.0	" - Tan Silty "			

RECEIVED

OCT 27 1989

JUN 15 1989

DIVISION OF ENVIRONMENT

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) Robert J. [Signature]