WATER WELL RE	R WELL RECORD Form WWC-5 riginal Record Correction Change in Well Ust				sion of Water arces App. No.		Well ID	MW11I	
1 LOCATION OF	WATER WELL:	Fraction			Section Numb	, ,		Number	
County Sedgwic			¼ NW ¼			T 29	S R		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:									
Address: 412 W Grand Ave. 421 E Kirby St., Haysville, KS									
Address: City Haysville State: KS ZIP:									
City Ha 3 LOCATE WELL	4 DEP	TH OF COMPLETED WEL	L: 30	ft :	5 Latitude:	NA	(de	cimal degrees)	
WITH "X" IN	Depth(s) Gi	oundwater Encountered: 1)		ft	Longitude	NA	(de	cimal degrees)	
SECTION BOX:	Dry Well			Datum: WGS		83 NAD 27			
N	NA ft. no-day-yr)	NA		Latitude/Longitude unit make/model:	•	,			
	no-day-yr)			AAS enabled?	Yes No	)			
NW NE	ft		X Land S	Survey Topog	raphic Map				
w	E after hours pumping				gpm Online Mapper				
x	after	Water well was hours pumping	gnm	<u> </u>	6 Elevation	NA ft	Ground Le	evel X TOC	
sw — se	Estimated Yield: gpm			,		Land Survey		Topographic Map	
Bore Hole Diameter: 8.25 in to				ft, and Other					
S		in to	ft						
7 WELL WATER TO BE USED AS:									
1 Domestic:		c Water Supply: well ID		10	Oil Field	Water Supply: lease	:		
Household		11 Test Hole: well ID							
Lawn & Garden 7 Aquifer Recharge: well ID					Cased		Geotechnic	ai	
Livestock 8 X Monitoring: well ID MW111 2 Irrigation 9 Environmental Remediation: well ID				12 Geothermal: How many bores?					
2 Irrigation 3 Feedlot	xtraction	a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water							
4 Industrial	Reco	· • = · ·	Allaction		Other (spe	:6-2-		· - 1	
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted:  Water well disinfected? Yes X No									
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded									
Casing diameter 2 in to 20 ft, Diameter in to ft, Diameter in to ft,									
Casing height above land surface NA in. Weight lbs./ft. Well thickness or gauge No									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel Stainless Steel Fiberglass X PVC Other (Specify)									
Brass Galvanized Steel Concrete tile None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:									
Continuous Slot X Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)									
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)									
SCREEN-PERFORATED			ft, From	ft.	to	ft, From	ft. to	ft,	
	NTERVALS: From		ft, From	ft.	to	ft, From	ft. to	ft,	
9 GROUT MATERIAL: Neat cement Cement grout X Bentonite X Other Concrete: 0-0.5'									
Grout intervals: From 0.5 ft. to 18 ft, From ft. to ft, From ft. to ft,									
Nearest source of possib									
Septic Tank	=	al Lines Pit Privy		==	tock Pens	Insecticide			
Sewer Lines	Cess	Pool Sewage L age Pit Feedyard	agoon	_	Storage izer Storage	Oil Well /	d Water Well		
Watertight Sewer Li Other (Specity)				remi	izer Storage	On wen/	Gas well		
Direction from well?	***************************************	Distance fi	rom well?			ft			
10 FROM TO	L	THOLOGIC LOG		FROM	ТО	LITHO. LOG (co	nt.) or PLUGGIN	NG INTERVALS	
0 0.3	Topsoil								
0.3 7	Silty clay								
7 15 30	Clayey silt w/ fine sa Fine-Coarse sand w/								
.5 50	The Course Suite Wi								
				DIE I	2 005 5000				
					22-087-72896 hitoring well is sl	hallow groundwater	<20' of grout	was installed of	
Target of monitoring well is shallow groundwater, <20' of grout was installed at the direction of KDHE.									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, reconstructed, or plugged under my									
jurisdiction and was completed on (mo-day-year) 10/12/17 and this record is true to the best of my knowledge and belief. Kapas Valer Well Contractor's  License No 757 This Water Well Record was completed on (mo-day-year) 10/23/17									
License No 75 under the business name	***************************************	ten Ima			17 Signature	100		,	
					.,	ent, Bureau of Water	GWTS Section.	·Ł	
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.									
	dheks.gov/waterwell/inde		A 82a-1212					7/10/2015	

Sedgwick Co T.29 R.1E Sec 5, 8, 9

Former American Cleaners Site - MW-6 through MW-14 Locations

