·		_				1		
WATER WELL RECO	ORD Form WWC-:  Correction Change in Well			ision of Water urces App. No.		Well ID	MW12S	
1 LOCATION OF W	ATER WELL: Frac	ction			er Township Nun			
County Sedgwick								
2 WELL OWNER: La Business: Former Ame		1		n or intersection	,			
Address: 412 W Gran		st town or intersection): If at owner's address, check here:  way Ave., Haysville, KS						
Address:			2 3. 27.042.1127 .	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
City Haysv								
3 LOCATE WELL	4 DEPTH OF COMPL	ETED WELL:	25 ft	5 Latitude:	NA	************************	cimal degrees)	
WITH "X" IN	WITH "X" IN         Depth(s) Groundwater Encountered: 1)           SECTION BOX:         2)         ft 3)         ft, or 4)         Dry We			ft Longitude NA (decimal degrees) Horizontal Datum: WGS 84 NAD 83 NAD 27				
N WELL'S STATIC WATER LEVEL: NA ft				Source for Latitude/Longitude:				
X below land surface, measured on (mo-day-yr)								
NW NE above land surface, measured on (mo-day-yr)				(WAAS enabled? Yes No)				
Pump test data: Well water wasft				X Land Survey Topographic Map				
w	after hours pumping gpm Water well was ft			Online Mapper				
	1 1		n –	6 Elevation	NA fi	Ground L	evel X TOC	
$\frac{1}{x}$ sw $\frac{1}{x}$ se $\frac{1}{x}$	afterhours p		Spin.	6 Elevation NA ft Ground Level X TOC Source X Land Survey GPS Topographic Map				
	Bore Hole Diameter: 8.25 in to ft, and			Other				
S		in to	fi					
1 mile	-							
7 WELL WATER TO B		!! #D	1	o Con Eight 1	Water Supply: lease			
1 Domestic: Household	5 Public Water Supply: 6 Dewatering: how mar			Test Hole: wel				
Lawn & Garden 7 Aquifer Recharge: well ID				Cased Uncased Geotechnical				
Livestock	1	12 Geothermal: How many bores?						
2 Irrigation 9 Environmental Remediation: well ID a) Closed Loop Horizontal Vertical						al		
3 Feedlot Air Sparge Soil Vapor Extraction b) Open Loop Surface Discharge Inj. of Water						Inj. of Water		
4 Industrial	Recovery	Injection		Other (spe	cify):	•		
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 15 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 INTERVALS: From 15 ft. to 25 ft, From ft. to ft, From ft. to ft,							6	
SCREEN-PERFORATED INTERVALS: From 15 ft. to 25 ft, From ft. to ft. The								
9 GROUT MATERIAL: Neat cement Cement grout X Bentonite X Other Concrete: 0-0.5' Grout intervals: From 0.5 ft. to 13 ft, From ft. to ft, From ft. to ft,								
Nearest source of possible contamination:								
Septic Tank	Lateral Lines	Pit Privy	Lives	stock Pens	Insecticide	Storage		
Sewer Lines	Cess Pool	Sewage Lagoon	Fuel	Storage	===	d Water Well		
Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well / Gas Well								
Other (Specity)								
Direction from well?		Distance from well	?		ft			
10 FROM TO	LITHOLOGIC	LOG	FROM	TO	LITHO. LOG (co	nt.) or PLUGGIN	IG INTERVALS	
	opsoil							
	lt w/ fine sand lt w/ fine-medium sand							
			KDHE ID: (	72-087-72896				
KDHE ID: C2-087-72896  Target of monitoring well is shallow groundwater, <20' of grout was installed at								
the direction of KDHE.								
11 CONTRACTOR'S OR	LANDOWNER'S CERTIFICAT				reconstructed or		under my	
jurisdiction and was completed on (mo-day-year) 10/13/17 and this record is true to the best of my knowledge and belief. Kansas was well Contractor's License No 757 This Water Well Record was completed on (mo-day-year) 10/23/17								
License No 757	Lorson P. Associator Inc			Signature (		$\rightarrow$		
under the business name of Larsen & Associates. Inc.  Signature  Mail   white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Wart WTS 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.								
	rs gov/waterwell/index html						7/10/2015	

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

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

