		RECORD	Form \	WWC-5	Di	vision of Water			
		Correction	Chang	e in Well Use		sources App. No		Well ID	
1 LOCA	TION OF V	VATER WEL	L:	Fraction		ction Number	Township Numb		
	y: Wichita	·		NW 1/4 SE 1/4 NW 1/4	1	14	T 17 S	R 38 □ E ■ W	
2 WELL OWNER: Last Name: Larson First: Brady Street or Rural Address where well is located (if unknown, distance and									
	Business: Address: 2115 Crosswind Rd. direction from nearest town or intersection): If at owner's address, check here:								
Address: From the intersection of Wichita roads 6 and J -								nd J -	
City:	Sharon S	Sprinas	State: KS	ZIP: 67758	.64 miles north, and .73 miles west				
3 LOCATE WELL								2	
								(decimal degrees)	
	ON BOX: N	2)	ft.	3) ft., or 4) [53 ft. Longitude: -101.48997				
·		WELL'S ST	TATIC WA	TER LEVEL: 1.5	53 ft.	Source f	or Latitude/Longitude	· MINAD 83 LINAD 2/	
		below l	below land surface, measured on (mo-day-yr). 10-14-15 GPS (unit make/model. Garmin GPS 5						
NW	NE	above la	□ above land surface, measured on (mo-day-yr)						
w	<u> </u>	Pump test a	ata: Well w	ater was197 1	t.	☐ Land Survey ☐ Topographic Map			
'	Е	after1 hours pumping 30							
SW	SE	after	after hours numping grow						
		Estimated Y	Estimated Yield:50±gpm			6 Elevation: .3414ft. Ground Level TOC			
	S	Bore Hole D	Bore Hole Diameter:9 in. to220			ft. and Source: Land Survey GPS Topographic Map			
,	mile	O DE VICES	,,,	in. to	ft.		Other .GQQgJe .ea	irth	
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
House House		3. <u> </u>	Public wa Dewaterin	ter Supply: well ID g: how many wells?			field Water Supply: le	ease	
☐ Lawn & Garden 7. ☐ Aquifer			Aquifer Re	charge: well ID		t Hole: well ID Cased □ Uncased □ Geotechnical			
	Livestock 8. Monitoring: well ID								
2. 🔲 Irrigat	☐ Irrigation 9. Environmental Remediation: well ID.					a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot ☐ Air Sparge					Extraction	b) Oper	b) Open Loop Surface Discharge Inj. of Water		
4. Industrial Recovery Injection 13. Other (specify):									
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:									
Water well disinfected? Yes No									
8 TYPE OF CASING USED: Steel PVC Other									
Casing diam	ieter	in. to	44 ft.,	Diameter	in. to	ft., Diamet	er in. to	ft.	
Casing height above land surface 18 in. Weight 2.81 lbs./ft. Wall thickness or gauge No265.									
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)									
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 .200 ft. to .220 ft., From ft. to ft., From ft. ft. o ft.									
GRAVEL PACK INTERVALS: From 20 ft. to 220 ft. From ft to ft From ft to ft									
GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 6, to 26 ft., From ft. to ft.									
Nearest source of possible contamination:									
Sewer Lines Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Sewage Lagoon Fuel Storage Abandoned Water Well									
■ Watertight Sewer Lines									
Other (Specify)									
Direction from well? 5.9.04.11 Distance from well? 6/10 mile ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC ONT OF PLUGGING INTERVALS.									
0			HOLOG	AC LOG	FROM	TO LI	THO. LOG (cont.) or	PLUGGING INTERVALS	
5		Clay cemented sa	nd/cloach	W					
45		sand/sandy o							
135		medium sand							
142		medium/coar							
150		fine sandy cla	·						
175		sand/gravel	:		Notes:	L			
208 213 yellow shale									
213 220 blue shale									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed or plugged									
Kansas Water Well Contractor's License No. 885. This Water Well Record was completed on (mo-day-year) 10-22-2015 under the business name of Kemp's Well Service. Signature Signature									
under the D	иоппсоо паш	CUL IXCHIU 3	AAGII OCLA	11762		ONSTHE M. A	and I was I so Add		
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.									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									