

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

20180123

Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL:

County: Rice

Fraction

1/4 NW 1/4 NE 1/4 NE 1/4

Section Number

34

Township Number

T 18 S

Range Number

R 10 E W

2 WELL OWNER: Last Name:

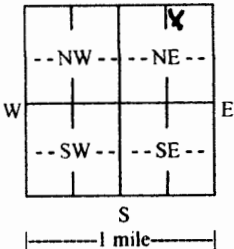
First:

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:

4 South, 3/4 West of Bushton

Business: Edison Operating
Address: 8100 East 22nd St N
Address: Bldg 1900
City: Wichita State: KS ZIP: 67226

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL:100..... ft.

Depth(s) Groundwater Encountered: 1) ft.
2) ft. 3) ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL:22..... ft.
 below land surface, measured on (mo-day-yr) 6-5-18
 above land surface, measured on (mo-day-yr).....

Pump test data: Well water was ft.
after..... hours pumping gpm
Well water was ft.
after..... hours pumping gpm

Estimated Yield:gpm
Bore Hole Diameter:10..... in. to100..... ft. and
..... in. to ft.

5 Latitude:38.4478.....(decimal degrees)

Longitude:98.4090.....(decimal degrees)

Horizontal Datum: WGS 84 NAD 83 NAD 27

Source for Latitude/Longitude:

GPS (unit make/model:.....)

(WAAS enabled? Yes No)

Land Survey Topographic Map

Online Mapper:

6 Elevation:ft. Ground Level TOC

Source: Land Survey GPS Topographic Map

Other

7 WELL WATER TO BE USED AS:

- 1. Domestic:
 Household
 Lawn & Garden
 Livestock
- 2. Irrigation
- 3. Feedlot
- 4. Industrial

- 5. Public Water Supply: well ID
- 6. Dewatering: how many wells?
- 7. Aquifer Recharge: well ID
- 8. Monitoring: well ID
- 9. Environmental Remediation: well ID
- Air Sparge Soil Vapor Extraction
 Recovery Injection

- 10. Oil Field Water Supply: lease ...Wessler #1-34...
- 11. Test Hole: well ID
- Cased Uncased Geotechnical
- 12. Geothermal: how many bores?
- a) Closed Loop Horizontal Vertical
- b) Open Loop Surface Discharge Inj. of Water
- 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 JOINTS: Glued Clamped Welded Threaded

Casing diameter5..... in. to100..... ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface18..... in. WeightSDR-26..... lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

- Steel Stainless Steel Fiberglass PVC Other (Specify)
- Brass Galvanized Steel Concrete tile None used (open hole)

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: From100..... ft. to60..... ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From100..... ft. to20..... ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From ft. to ft., From20..... ft. to0..... ft., From ft. to ft.

Nearest source of possible contamination:

- Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
- Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well
- Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well
- Other (Specify) ...None.....

Direction from well? Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Top soil			
3	45	Brown tan clay			
45	50	Yellow gray shale			
50	100	Ironated sandstone (coarse)			

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) ...6-5-18..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.134..... This Water Well Record was completed on (mo-day-year) ...7-3-18..... under the business name of ...Rosencrantz- Bemis Ent Inc..... Signature*Gora Aelfe*.....

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>

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