WATER WELL R		WWC-5		ision of Water	20180149	W. W. ID		
Original Record		ge in Well Use		urces App. No.	· · · · · · · · · · · · · · · · · · ·	Well ID		
1 LOCATION OF W	ATER WELL:	Fraction		tion Number	Township Number	Range Number R 12 ☐ E ■ W		
County.								
2 WELL OWNER: Last Name: Street or Rural Address where well is located (if unknown, distance and								
Business: Dixon Operating Company, LLC direction from nearest town or intersection): If at owner's address, check here:								
Address: 8100 E. 22nd Street North Address: Bldg 300, Ste 200 1 3/4 South, 1 East of Hudson								
City: Wichita	State: KS	ZIP: 67226						
3 LOCATE WELL	1		40 0					
WITH "X" IN		MPLETED WELL:			5 Latitude:(decimal degrees)			
SECTION BOX:	Depth(s) Groundwater		Longitude:					
N		3) ft., or 4) TER LEVEL:				LI NAD 83 LI NAD 27		
	WELL'S STATIC WATER LEVEL:					,		
NW NE	above land surface							
The state of the s		water was ft		☐ Land Survey ☐ Topographic Map				
W E	after hour	s pumping	gpm	Online Mapper:				
SW SE	1	water was ft						
X		s pumping	gpm	6 Flevatio	n· Ar	☐ Ground Level ☐ TOC		
	Estimated Yield:gpm Bore Hole Diameter:19 in. to40 ft. and			6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S 1 mile	Bore Hole Diameter: .		. π. and					
1 mile in. to ft. Uother								
1. Domestic: 5. Public Water Supply: well ID								
☐ Household		ater Suppry: wen 1D ng: how many wells?		11. Test Hol	e: well ID	·····		
☐ Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical			
					nal: how many bores?.			
2. Irrigation	9. Environmental Remediation: well ID a) Closed Loop					☐ Vertical		
					Loop Surface Discl			
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 JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded								
Casing diameter 5 in. to 40 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 18 in. Weight SDR-26 lbs/ft. Wall thickness or gauge No.								
Casing height above land surface								
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)								
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
SCREEN-PERFORATED INTERVALS: From30 ft. to ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From 40 ft. to 8 ft., From ft. to ft., From ft., From ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
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								
						LUCCDIC DISTRICT		
10 FROM TO	LITHOLO	GIC LUG	FROM	TO LI	THU. LUG (cont.) or P	LUGGING INTERVALS		
	Top soil			ļ				
	Brown clay		1					
	Sand & gravel- small	med clean coarse	 	<u> </u>				
31 40	Brown white clay		 					
			<u> </u>	<u> </u>				
			<u> </u>					
			Notes:					
11 CONTROL CTORIC OR LANDOWN CORPORATION CONTROL TO THE CONTROL OF								
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)7-5-18 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo-day-year)8-9-18								
under the business nom	e of Rosencrantz-	This wa Bemis Ent Inc	Si	onature	OLA OLA A	zj		
under the business name of Rosencrantz- Bemis Ent Jnc Signature Signature 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.kdhek			KSA 82a-12			Revised 7/10/2015		