

Sedgwick

CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as SE SW NE, 38-26S-1W

changed to SE SE SE, 33-26S-1W

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, city map, and

Wichita West 1:24,000 topo. map. initials: DR date: 10/24/2001

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		<u>SE 1/4 SW 1/4 NE 1/4</u>	<u>38</u>	T <u>26</u> S	R <u>1</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>3015 Wildrose Wichita KS.</u> check section					
2 WATER WELL OWNER: <u>Kenneth Lightcap</u>					
RR#, St. Address, Box #: <u>3015 Wildrose</u>					
City, State, ZIP Code: <u>Wichita KS.</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>51</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>25</u> ft. 2. <u>51</u> ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL: <u>51</u> ft. below land surface measured on mo/day/yr <u>1-5-97</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter: <u>1.0</u> in. to <u>51</u> ft. and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		☒ Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes ☒ No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ☒ Clamped _____ ☒ PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____					
Blank casing diameter: <u>5</u> in. to <u>51</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface: <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>26</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot ☒ 3-Min slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From _____ ft. to <u>50</u> ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>25</u> ft. to <u>50</u> ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout ☒ 3 Bentonite 4 Other _____ Grout Intervals: From _____ ft. to <u>25</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well ☒ 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____ 13 Insecticide storage <u>20 ft</u>					
Direction from well? <u>South</u> How many feet? <u>20 ft</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	TOP SOIL			
2	4	CLAY			
4	17	SAND			
17	21	CLAY			
21	42	med gravel			
42	44	CLAY			
44	51	med sand gravel			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) ☒ constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>1-5-97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>Cell</u> This Water Well Record was completed on (mo/day/yr) <u>1-5-97</u> under the business name of <u>Chase Drilling</u> by (signature) <u>Paul Chie</u>					