Fimail 4/18/

WATER WELL	RECORD Form	WWC-5		Divisi	on of Water			
Original Record				burces App. No.		Well ID		
1 LOCATION OF County: SEDW	WATER WELL:	Fraction SW 1/4 NW 1/4 NE 1/		Sectio	on Number 33	Township Numb	er Range Number R 1 □ E ■ W	
WELL OWNER:		First:		Rural			(if unknown, distance and	
Business: TRADE	r irst.	direction from nearest town or intersection): If at owner's address, check here:						
Address:			8206 WEST KACKLEY CIR, WICHITA, KS, 67205					
Address. 7540 VVEST NORTHVIND STELLOO								
City: WICHIT 3 LOCATE WELL								
WITH "X" IN		WPLETED WELL:		ft.			(decimal degree	
SECTION BOX:		Encountered: 1) ft. ) ft., or 4) 🗖 Dry Well			Longitude:(decimal degrees) Horizontal Datum: WGS 84 NAD 83 NAD 27			
N	TER LEVEL: 18 ft.			Source for Latitude/Longitude:				
×	e, measured on (mo-day	/-yr) <b>4/9/2</b>	019			· · · · · · · · · · · · · · · · · · ·		
NW NE		e, measured on (mo-day-yr) water was ft.						
w	s pumping gpm			□ Land Survey □ Topographic Map □ Online Mapper:				
	water was							
SWSE	s pumping	. gpm		6 Flovati		Ground Level TO		
	gpm 11.5 in. to60 ft. and			6 Elevation:      ft. □ Ground Level □ TOC         Source:       □ Land Survey □ GPS □ Topographic Map				
1 mile								
7 WELL WATER TO BE USED AS:								
1. Domestic:	5. 🗌 Public W	ater Supply: well ID					ease	
☐ Household ■ Lawn & Garden	<ul> <li>6. Dewatering: how many wells?</li> <li>7. Aquifer Recharge: well ID</li> </ul>				II. Test Hole: well ID     Cased □ Uncased □ Geotechnical			
Livestock		8. Monitoring: well ID				12. Geothermal: how many bores?		
2. Irrigation		9. Environmental Remediation: well ID				a) Closed Loop  Horizontal Vertical		
3. 🗖 Feedlot	Air Sparge Soil Vapor Extraction				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								
<b>TYPE OF CASING USED:</b> ☐ Steel ■ PVC ☐ Other CASING JOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded asing diameter ft., Diameter ft., Diameter								
asing 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)								
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From ft. to .60 ft., From ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: □ Neat cement □ Cement grout ■ Bentonite □ Other								
Nearest source of possible contamination:								
Septic Tank	🗌 Lateral Lir				ivestock Pens		cide Storage	
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well								
■ Watertight Sewer	Lines 🗌 Seepage Pi			L Fe	ertilizer Stora		in/Jas well	
Direction from well? SOUTH Distance from well? 18								
10 FROM TO	LITHOLO	GIC LOG	FRO	M	TO L	ITHO. LOG (cont.) o	r PLUGGING INTERVAL	
0 1	TOP SOIL							
1 13 13 18								
13 18 18 21	MED SAND CLAY							
21 28	MED GRAVEL							
28 58	GRAVEL					·	and a second	
58 60	CLAY		Notes	:	I			
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) .4/9/2019 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 884								
Kansas Water Well Contractor's License No. 884. This Water Well Record was completed on (mo-day-year) 4/18/2019. under the business name of WENINGER DRILLING LLC. 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.								
Mail 1 white conv	along with a fee of \$5.00 for e	ach constructed well to: K	ansas Depart	tment of	f Health and Ei	nvironment, Bufeau of W	ater, 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								
VISITUS at http://www.kuneks.gov/waterwen/index.num								