	nal Record			W W C-5			sion of Water			W II ID		
				ge in Well Use			irces App. No ion Number		L'. NT 1	Well ID		
1 LOCATION OF WATER WELL: County: SEDGWICK			Fraction	SE 1/4 SE 1/4 NE 1/4 SW 1/4			on Number Township Numb					
											□ E ■ W	
	LOWNER:			First:	Street	r Kura	al Address w	here well	is located	(if unknown,	, distance and	
	Business: SOCORA HOMES  Address: direction from nearest town or intersection): If at owner's address, check here:											
Address		RTH WAC	O, STE.400		3303 NORTH SHEFFORD STREET, WICHITA, K						67205	
City:	WICHIT		State: KS	ZIP: 67203					, ,			
3 LOCA			TH OF COL		60	0						
WITH	"X" IN			MPLETED WELL			5 Latitude:(decimal degrees)					
SECTI	SECTION BOX: Depth(s) Groundwater F. 2)						Longitude:					
	WELL'S STATIC WAT				16 ₽	en	Horizon	tal Datum:	LI WGS 84	LINAD	83 🖺 NAD 27	
	helow land surface			measured on (mo-d	measured on (mo-day-yr). 8/28/2019				/Longitude:			
, , , , ,	\ \hat{h}			, measured on (mo-da			☐ GP:	(unit mak	e/model:		)	
NW -	NE	Pump te	st data: Well v	vater was	., ft.		(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
W	W after hours				pumpinggpm			Online Mapper:				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Well wa				ater was ft.			T.P.				
SW	SW 3 SE after hours			s pumping	pumpinggpm							
	Estimated Yield: 20.			)gpm	gpm			6 Elevation:ft. Ground Level TOC				
	S Bore Hole Diameter:			11.5 in to 60				Source:   Land Survey GPS Topographic Map				
1	mile	1		in. to	a. to				*************			
7 WELL WATER TO BE USED AS:												
1. Domestic		5	. Public Wa	ater Supply: well ID.	***************		10. 🔲 Oil I	ield Water	Supply: lea	se		
I				g: how many wells?			11. Test Hole: well ID					
				charge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?					
_					: well ID			mal: how	many bores?			
					Remediation: well ID			a) Closed Loop   Horizontal   Vertical				
3. ☐ Feedlot ☐ Air Sparge 4. ☐ Industrial ☐ Recovery							b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
			☐ Recovery									
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 diameter 5 in. to 60 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 15 in. Weight lbs./ft. Wall thickness or gauge No. SDR-26												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
Brass		vanized Stee			used (oper	hole)						
SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
CCDEEN I	DEDEAD AT		WALC. E	. An e 60	saw Cut	□ NOI	ne (Open Hol	e) 0	Б	G .		
SCREEN-I	PANEL DA	CK DITER	VALS: From	1.40 ft. to .60	II., FI	om	п. то	П.,	From	It. to .	ft.	
O CDOU	KAVELPA	CK INTER	VALS: From	26 ft. to 6	9 II., FI	om	It. to	It.,	From	ft. to .	ft.	
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Septic			ation: ] Lateral Line:	s Pit Privy		Пт:	ivestock Pens		□ I	1. O		
Sewer			Cess Pool	Sewage I			ivestock rens		<ul><li>☐ Insecticid</li><li>☐ Abandon</li></ul>		(Ja11	
	ight Sewer Li	-	Seepage Pit				ertilizer Storag				/CII	
Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)												
Direction fro	om well? SC	UTH		Distance from	well? .14				ft.			
10 FROM	ТО		LITHOLOG		FRO					LUGGING	INTERVALS	
0	2	TOP SOIL							,,,,,,			
2		CLAY										
17		SANDY CI	AY									
21		MED SAN										
26		CLAY										
		GRAVEL										
40		CLAY			Notes							
					- 110168	•						
41	60	GRAVEL			-							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my in	riediction of	d was som	pleted on (m	o-day-year) .8/28/2	14: 11118 V	ater W	vell was	Unstructed	i, recons	structed, o	r   plugged	
Kansas Wat	ter Well Co	itractor's Li	cense No. 8	84 This W	ater Well	uiu iiii Recor	d was compl	etedan (n	nost of my l	7 3/33/3/	and benef.	
under the bu	usiness name	of WENI	INGER DRII	LUNG, LLC		Sign	ature 7/10	ula Ha	ukinst-			
Mail 1	white copy alo	ng with a fee	of \$5.00 for each	constructed well to: Ka	nsas Departi	nent of	Health and Env	ironment. H	ureau of Water	r, GWTS Se	ction.	
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 ath ttp					KSA 82a					Revised 7		