" CORRECTED"

WATER WELL RECORD Form WWC-5						vision of Water		W. II ID		
☐ Original Record ☑ Correction ☐ Change in Well Use 1 LOCATION OF WATER WELL: Fraction						Resources App. No. Well ID Section Number Township Number Range Num			aca Number	
County: Sedgwick Praction NW 1/4 NW 1/4 NW 1/4 NW 1/4										
	OWNER:			First:		reet or Rural Address where well is located (if unknown, distance and				
Business: Nowak Construction d						direction from nearest town or intersection): If at owner's address, check here:				
Address: PO Box 218						SE Corner of K-96 & Ridge Road intersection in Wichita, KS				
Address: City: Goddard State: KS ZIP: 67052						SE Comer of N-30 & Mage Noad Intersection in Wichita, No				
3 LOCAT										
WITH		4 DEPTH	OF COM	IPLETED WELL:						
SECTIO	ON BOX:			Encountered: 1)		Longi	tude: 97.426	004	(decimal degrees)	
2) ft. 3)					Dry Well		: □ WGS 84		IAD 27	
		below l	and surface	, measured on (mo-day	-vr) 09/04/201		for Latitude/Longitude PS (unit make/model:		`	
NW-	NE	above l	and surface	, measured on (mo-day	-yr)		(WAAS enabled?			
Pump test data: Well				vater was		□ La	☐ Land Survey ☐ Topographic Map			
W	E	after	hour	s pumping	gpm Online Mapper:					
SW	SE	after		vater was						
		Estimated V	rield: 500) gnm	7.7	6 Elevat	6 Elevation: 1339ft. ☑ Ground Level ☐ TOC			
1	S	Bore Hole I	Diameter:	20 in. to 25	ft. and	Source	Source: Land Survey GPS Topographic Map			
	mile			in. to			Other KOLAR			
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. ☐ Public Water Supply: well ID										
				echarge: well ID		11. Test H	11. Test Hole: well ID			
	☐ Livestock Monitoring: well ID									
2. 🗌 Irrigat	2. ☐ Irrigation 9. Environmental Remediation: well ID					a) Closed Loop Horizontal Vertical				
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex					b) Open Loop Surface Discharge Inj. of Water				
4. Indust	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 diameter 10 in to 15 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12 in Weight lbs./ft. Wall thickness or gauge No. 413										
TYPE OF SCREEN OR PERFORATION MATERIAL: Weight										
☐ Steel ☐ Stainless Steel ☐ Other (Specify)										
☐ Brass ☐ Galvanized Steel ☐ 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 15 ft. to 25 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 20 ft. to 25 ft., From ft. to ft.										
9 GROUT MATERIAL: Neat cement Cement grout Department College College										
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other ☐										
Nearest sou	irce of possib	le contaminati	on: 🗸 No	potential source of cor	tamination wi	ithin 200 ft.				
Septic			Lateral Line			Livestock Per		cide Storage		
Sewer			Cess Pool	☐ Sewage La		Fuel Storage		oned Water	Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well										
Direction from well? ft.										
10 FROM	TO	L	ITHOLOG	GIC LOG	FROM		LITHO. LOG (cont.) or		GINTERVALS	
0		Top Soil						1200011	31112111125	
1	35	Sand Fine/C	oarse							
					-	-				
					+	-				
					Notes:					
	Tyotes:									
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) .09/04/2019 and this record is true to the best of my knowledge and belief.										
under my 1	urisdiction a	nd was compl	eted on (m	o-day-year) 09/04/2	019 and	this record is	true to the best of m	v knowledg	re and helief	
Kansas Wa	iter Well Co	ntractor's Lice	ense No	Drilling Inc	ater Well Re	cord was com	pleted on (mo-day-y	ear) .04/24	(2020	
		Send one copy to	WATER W	ELL OWNER and retain	one for your rec	ords. Fee of \$5.	00 for each constructed we	ell.		
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.										
Visit us at h	ttp://www.kdhe	eks.gov/waterwel	/index.html						A 82a-1212	