WATER WELL R			WWC-5			ision of Water				
Original Record			e in Well Use			urces App. N		Well ID	N7 1	
1 LOCATION OF W		L:	Fraction			tion Number	- · · · · · · · · · · · · · · · · · · ·		nge Number	
County: SEDGWI		1	NW¼ NW¼ NV			2	T 27		¹ □E ■W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:										
Business: CRAIG STUART HOMES Address: Address: Address: Description from nearest town or intersection): If at owner's address, check here:										
Address: 2708 N LA	AKE RIDGE S	ST			/ICHITA, K					
City: WICHITA		State: KS	ZIP: 67205		/ICIIIIA, N	01203				
3 LOCATE WELL	4 DEPTH	OF COM	PLETED WEL	T.:	45 n	5 Latitu	de:		(decimal degrees)	
WITH "X" IN			Encountered: 1)			ž.	ude:		- 4	
SECTION BOX:	2)	ft. 3	s) ft., or	4) 📮	Dry Well		ntal Datum: WGS			
[WELL'S ST.	ATIC WAT	TER LEVEL:	13	ft.	Source	Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr). 04/14/2017					□GI	GPS (unit make/model:)			
NW NE	□ above land surface, measured on (mo-day-yr)					1	(WAAS enabled? ☐ Yes ☐ No)			
W E		after hours pumping gpm					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:			
1 1 1 1 1		Well water was ft.					- Chimie Mepper			
SW SE	after	hours	pumping	g	pm	(Fl.	•	۰. 🗆 ۵	441 T TOC	
	Estimated Yi	eld:29±	gpm 10.5in. to4	15		o Elevai	ion: : □ Land Survey [.π. ∐ Groun Tabe i Ta	a Level 100	
S 1 mile	Bore Hole D					Source)	
1 mile in. to ft.										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease										
☐ Household	6. Dewatering: how many wells?					11. Test Hole: well ID				
Lawn & Garden 7. Aquifer Recharge: well ID						☐ Cased ☐ Uncased ☐ Geotechnical				
☐ Livestock	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?			
2. Irrigation							a) Closed Loop Horizontal Vertical			
3. Feedlot		Air Sparge			traction		en Loop Surface			
4. Industrial Recovery Injection 13. Other (specify):										
Was a chemical/bacteriological sample submitted to KDHE? 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										
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other										
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 .35										
GRAVEL PACK INTERVALS: From 23 ft. to 45 ft., From ft. to ft., From ft. to ft., From ft. to ft.										
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other										
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										
☐ Other (Specify) Direction from well? SOUTHWEST Distance from well? 100+ ft.										
10 FROM TO		THOLOG		u wel	FROM		LITHO. LOG (cont.)		IC INTERVALS	
	OP SOIL	ZHOLOU			1 KOWI		LITTO, LOG (COIL.)	VI I LOUGH	O ITTLK TALS	
	CLAY						# **			
8 40 N	MED/LARGE	GRAVEI	_			-				
40 42 N	MED GRAVE						· · · · · · · · · · · · · · · · · · ·	*****************		
	SHALE		- P-1							
			· - · · · · · · · · · · · · · · · · · ·							
					Notes:	· , ·	***************************************			
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) 04/14/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 884 This Water Well Record was completed on mo-day-year) 04/20/2017										
under the business name	e of WENING	GER DRI	LLING LLC	wau	ci wen kec	oru was com	on allo-day	-year) 47045	CARY.LI	
Mail 1 white copy ale	ong with a fee of \$	5.00 for eac	h constructed well to:	Kans	as Department	of Health and I	environment, Bureau of	Water, GWTS	Section,	
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.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										