	R WELL F			WWC-5			ision of Water	j i				
Original Record Correction Change in Well Use							ources App. N		Well ID			
1 LOCATION OF WATER WELL: Fraction SW1/4 SW						Section Number Township Number Range Number 74 NF 1/4 9 T 27 S R 1						
				SW1/4 SW1/4								
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and												
Business: RAIN PLUS direction from nearest town or intersection): If at owner's address, check here:												
Address: WICHITA KS 67212												
City:	WICHITA	<u> </u>	State: KS	ZIP: 67218	v	VICIIIA, N	3 07212		······			
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:60 ft. 5 Latitude:										.(decimal degrees)		
	SECTION BOX. Depth(s) Groundwater Encountered: 1)25							Longitude:(decimal degrees)				
N 2)										83 NAD 27		
WELL'S STATIC WATER LEVEL:23ftSource for Latitude/Long below land surface, measured on (mo-day-yr) 03/23/2017 ☐ GPS (unit make/moderate)										,		
1 1 .'	<u>ا '</u> با	below I	above land surface, measured on (mo-day-yr)					PS (unit make/model: .				
NW	NE		Pump test data: Well water was ft.					(WAAS enabled? [and Survey ☐ Topog		NO)		
w	w after hours pum					gpm Online Mapper:						
	Well water was fi											
SW	atternouts pumping						gpm 6 Elevation:ft. ☐ Ground Level ☐ TOC					
	Estimated Yield: S Bore Hole Diameter:1				60							
1	S Bore Hole Diameter: 10.5 in. to 60 ft. in. to ft.						Other					
7 WELL WATER TO BE USED AS:												
1. Domestic				ter Supply: we	ell ID		10. 🔲 Oil	Field Water Supply:	lease			
☐ House	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID					
	Lawn & Garden 7. Aquifer Recharge: well ID							☐ Cased ☐ Uncased ☐ Geotechnical				
	Livestock 8. Monitoring: well ID											
								losed Loop				
4. Indust			Recovery			xuacijon		ner (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 JOINTS: Glued Clamped Welded Threaded												
Casing diameter 5 in. to 60 ft., Diameter in. to ft., Diameter in. to ft.												
Casing diameter												
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)												
SCREEN-PERFORATED INTERVALS: From .49 ft. to .60 ft., From ft., From ft., From ft.												
GRAVEL PACK INTERVALS: From 23 ft. to 60 ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
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 □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well												
☐ Other (Specify)												
Direction from well? SOUTH Distance from well? 100+												
10 FROM	TO		ITHOLO	GIC LOG		FROM	TO	LITHO. LOG (cont.)	or PLUGGIN	G INTERVALS		
0		TOP SOIL										
18		CLAY				ļl						
18 22		FINE SAND				 						
40		MED GRAVI		CLAV		 						
+0	טט	MED GRAV	LL VVIIM	ULAT		 						
						Notes:	I.					
110163.												
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) .03/23/20.17 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) 03/24/20.17												
Kansas Wa	ater Well Co	ntractor's Lic	ense No. 🤄	994	This Wa	ter Well Rec	ord was con	pleted on (mo-day-	/ear) NSIZS	v.4V.\/		
Mail	1 white conv al	ong with a fee of	\$5.00 for ea	ch constructed we	ll to: Kan	as Department	of Health and I	Environment, Bureau of V	Vater, 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												