

WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water Resources App. No.

[Blank Box]

Well ID kmw10

1 LOCATION OF WATER WELL: County: Sedgwick Fraction 1/4 NW 1/4 NE 1/4 NW 1/4 Section Number 36 Township Number T 27 S Range Number R 1 E W

2 WELL OWNER: Last Name: Business: Paragon Services, Inc. Address: 1015 S. West Street City: Wichita State: KS ZIP: 67213 Street or Rural Address where well is located

3 LOCATE WELL WITH 'X' IN SECTION BOX: [Diagram] 4 DEPTH OF COMPLETED WELL: 48.78 ft. 5 Latitude: 37.670175 Longitude: -97.392020

7 WELL WATER TO BE USED AS: 1. Domestic 2. Irrigation 3. Feedlot 4. Industrial 5. Public Water Supply 6. Dewatering 7. Aquifer Recharge 8. Monitoring 9. Environmental Remediation 10. Oil Field Water Supply 11. Test Hole 12. Geothermal 13. Other

Was a chemical/bacteriological sample submitted to KDHE? Water well disinfected? No

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 2 in. to 2 ft. Diameter 6 in. to 6 ft. Diameter 6 in. to 6 ft. Casing height above land surface -6 in. Weight lbs./ft. Wall thickness or gauge No. Sch 40

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft. Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage

10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS

Notes: The well was originally installed as an abovegrade completed well. The well was cut off and was completed with a flushmount pad due to construction of a parking lot and vehicular traffic.

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) 09/26/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710 This Water Well Record was completed on (mo-day-year) 9/28/2017 under the business name of Below Ground Surface, Inc. Signature [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, 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.



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November 15, 2017

Kansas Department of Health and Environment
Bureau of Water-Geology Section
1000 S.W. Jackson Street, Suite 420
Topeka, KS 66612-1367

Re: WWC-5 (Reconstructed) Forms for a Site in Wichita, KS

Dear KDHE:

Enclosed are copies of the WWC-5 Forms for two monitoring wells recently reconstructed. The two wells were installed by KDHE in the past and there are no construction details. The two wells (KMW 11S and KMW 11D) were installed with abovegrade completions. Due to the expansion of the company and its parking lot, the abovegrade completions were removed and flushmount vaults were installed to allow vehicular traffic. If you have any questions, please give us or Doug Lane with APTIM (316-220-8038).

If you should need anything else, please call me at (913) 441-1088.

Sincerely,
Below Ground Surface, Inc.

Michael T. Ocsody, President

Attachment

RECEIVED
NOV 27 2017
BUREAU OF WATER