| County: SEXTWICK Fraction: SE SW SE NE Sec. 3 T 27 S R 1 W | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5) - to rectify lacking or incorrect information | | | | | | | | | |
| Owner: MABLE BUCY | | | | | | | | | |
| If corrected, location was listed as: Location changed to: | | | | | | | | | |
| Section-Township-Range: | | | | | | | | | |
| Fraction (1/4 1/4 1/4): NE NW NE SE SE SW SE NE | | | | | | | | | |
| Other changes: Initial statements: | | | | | | | | | |
| | | | | | | | | | |
| Changed to: | | | | | | | | | |
| Comments: | | | | | | | | | |
| Commones. | | | | | | | | | |
| Verification method: Used address to get lat/long coordinates. Used LEOWEB to get correct fractions | | | | | | | | | |
| The same of the sa | | | | | | | | | |
| Initials:Date: | | | | | | | | | |
| Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Avenue, Lawrence, KS 66047-3724 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367 | | | | | | | | | |
| {2017/09/11} | | | | | | | | | |

| | WELL R | | | WWC-5 | | ision of Water | | | | |
|---|--|-----------------|---------------------------|----------------------------|--------------------|--|---|--------------|-------------------|--|
| ■ Original Record ☐ Correction ☐ Change in Y | | | | e in Well Use | Resources App. No. | | | Well ID | | |
| 1 LOCATION OF WATER WELL: Fraction | | | | | | Section Number Township Number Range Number | | | | |
| | : SEDGWI | | | NE ¼ NW ¼ NE ½ | | or Rural Address where well is located (if unknown, distance and | | | | |
| | OWNER: I | ast Name: BU | CY | First: MABLE | | | | | | |
| Business: Address: | 5727 \ME | ST 25TH | | | direction from | nearest town or ir | itersection): If at owne | r s address, | check here: | |
| Address: 5727 WEST 25TH Address: | | | | | | | | | | |
| City: | WICHITA | | State: KS | ZIP: 67205 | | | | | | |
| 3 LOCAT | E WELL | 4 DEPTE | 1 OF COV | (DI ETED WELL) | 44 | 5 Lotitud | le: | | (daginal dagrage) | |
| Double(s) Commitment Encountered 1) | | | | | | | | | | |
| SECTION BOX: Deputits Groundwater Encountered: 17 | | | | | | | Longitude: | | | |
| WELL'S STATIC WATER LEVEL:10 | | | | | | | | | | |
| | × | | | , measured on (mo-day | | | | | | |
| above land surface, measured on (mo- | | | | | (| | | No) | | |
| | Pump test data: Well water was | | | | | ☐ Land Survey ☐ Topographic Map | | | | |
| W | E | alter | | vater was | | ☐ Online Mapper: | | | | |
| SW | SE | after | | s pumping | | | | | | |
| | | Estimated ' | Yield: 25: | tgpm | - | | on:ft | | | |
| 1 | S Bore Hole Diameter: 10.5 in. to 44 | | | | | | Source: ☐ Land Survey ☐ GPS ☐ Topographic Map | | | |
| 1 mile in. to ft. | | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | |
| 1. Domestic | | | | ater Supply: well ID | | | Field Water Supply: 1 | | | |
| _ | Household 6. ☐ Dewatering: how many wells? ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID | | | | | | ole: well ID | | | |
| | □ Lawn & Garden 7. □ Aquifer Recharge: well ID. □ Cased □ Uncased □ Geotechnical □ Livestock 8. □ Monitoring: well ID. 12. Geothermal: how many bores? | | | | | | | | | |
| 2. Irrigati | | | | | | | | | | |
| 3. 🗆 Feedlo | | | Air Sparg | | | | n Loop Surface D | | | |
| 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 JOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded | | | | | | | | | | |
| Casing diameter 5. in. to 44 ft. Diameter in. to ft. Diameter in. to ft. Diameter in. to ft. Casing height above land surface 17. 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) | | | | | | | | | | |
| ☐ 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 ft. to ft., From ft., From ft., From ft. | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From23 ft. to 44 ft., From ft. to ft., From ft. to ft. | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From | | | | | | | | | | |
| Grout Interv | als: From | ft. t | 0 .23 | ft., From | . ft. to | ft., From | ft. to | ft. | | |
| | | le contaminat | | □ p; p ; | | T | | 11.6 | | |
| Septic Sewer | | | Lateral Line Cess Pool | | | Livestock Pens | | cide 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? EAST Distance from well? 85 | | | | | | | | | | |
| Direction fro | om well? .E.A | \ST | | Distance from v | vell? .85 | | ft | | | |
| 10 FROM | TO | | LITHOLO | | FROM | TO L | ITHO. LOG (cont.) o | r PLUGGIN | IG INTERVALS | |
| 0 | | TOP SOIL | | | | ļ <u> </u> | | | | |
| 1 | - | CLAY | | | | | | | | |
| 4 | | MED GRAV | | | _ | ļl. | | *** | | |
| 41 | 44 | GRAY SHA | LE | | | | V-41 | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | Notes: | | | | | | | | | |
| | | | | | | | | | | |
| AL CONTRACTORIS OF LANDOWNERING OFFICE STORY | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed. Treconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) .6/18/2018 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) .7/1/2018 | | | | | | | | | | |
| under the b | ousiness nam | e of WENII | NGER DR | ILLING LLC | S | ignature . MARS | VA KAGYSPOWSKA | | | |
| 1 | | _ | | ch constructed well to: Ka | | | | | | |
| Į. | | | • | 66612-1367. Mail one to | | | e for your records. Telep | | | |
| Visit us at htt | <u>p://www.kdhek</u> | s gov/waterwell | /index.html | | KSA 82a-1 | 212 | | Kevise | d 7/10/2015 | |