

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.

Well ID **ACMW11D**

Original Record  Correction  Change in Well Use

**1 LOCATION OF WATER WELL:** County: **Sedgewick** Fraction  $\frac{1}{4}$  NW  $\frac{1}{4}$  NE  $\frac{1}{4}$  NW  $\frac{1}{4}$  Section Number **36** Township Number **T 27 S** Range Number **R 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: **Air Capital Plating**  
 Address: **1702 S. Knight St.**  
 Address: \_\_\_\_\_  
 City: **Wichita** State: **KS** ZIP: **67213**

**3 LOCATE WELL WITH "X" IN SECTION BOX:**

N	
X	
--NW--	--NE--
W	E
--SW--	--SE--
S	

**4 DEPTH OF COMPLETED WELL:** ..... **55** ..... ft.  
 Depth(s) Groundwater Encountered: 1) ..... **17** ..... ft.  
 2) ..... ft. 3) ..... ft., or 4)  Dry Well  
 WELL'S STATIC WATER LEVEL: ..... ft.  
 below land surface, measured on (mo-day-yr) .....  
 above land surface, measured on (mo-day-yr) .....  
 Pump test data: Well water was ..... ft.  
 after ..... hours pumping ..... gpm  
 Well water was ..... ft.  
 after ..... hours pumping ..... gpm  
 Estimated Yield: ..... gpm  
 Bore Hole Diameter: ..... **8.25** ..... in. to ..... **55** ..... ft. and  
 ..... in. to ..... ft.

**5 Latitude:** ..... **37.66244** ..... (decimal degrees)  
**Longitude:** ..... **97.38235** ..... (decimal degrees)  
 Horizontal Datum:  WGS 84  NAD 83  NAD 27  
 Source for Latitude/Longitude:  
 GPS (unit make/model: **garmen c60**) .....  
 (WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....

**6 Elevation:** ..... ft.  Ground Level  TOC  
 Source:  Land Survey  GPS  Topographic Map  
 Other .....

**7 WELL WATER TO BE USED AS:**

1. Domestic: <input type="checkbox"/> Household	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....
<input type="checkbox"/> Lawn & Garden	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
<input type="checkbox"/> Livestock	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
2. <input type="checkbox"/> Irrigation	8. <input checked="" type="checkbox"/> Monitoring: well ID <b>ACMW11D</b>	12. Geothermal: how many bores? .....
3. <input type="checkbox"/> Feedlot	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
4. <input type="checkbox"/> Industrial	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> 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 ..... **2** ..... in. to ..... **45** ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface ..... **-0.3** ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. **Sch. 40** .....

**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 **55** ..... ft. to **45** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From **55** ..... ft. to **43** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From **43** ..... ft. to **2** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) .....				

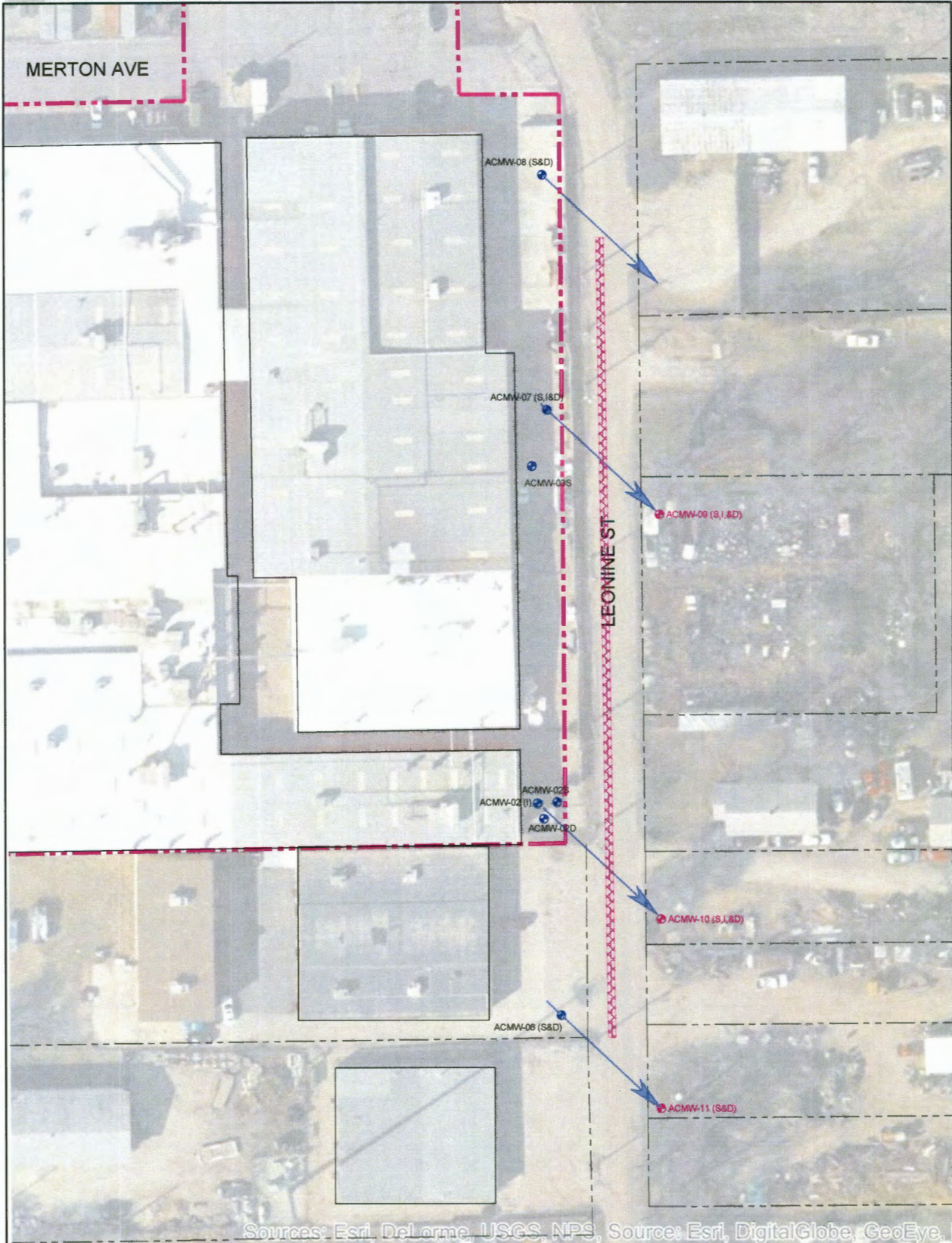
Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	Silty Clay, brown, soft			
4	55	Sand, fine to coarse grain			

**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) **1/16/2019** ..... 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) **1/24/19** ..... under the business name of **Below Ground Surface, Inc.** Signature *[Signature]*

File Location: PROJECT\ACF\Work - 2019-03-14 - Figure 8  
 Print Information: DWG TO PDF PC3 ALBERTS, SCOTT --- AND FALL BLEED 8 1/4" X 11 3/8" INCHES August 12, 2019 1 TRC COLOR C78



Sources: Esri, DeLorme, USGS, NPS, Source: Esri, DigitalGlobe, GeoEye.

**LEGEND:**

- FORMER ACP FACILITY PROPERTY BOUNDARY
- PROPOSED PRB LOCATION (ASSUMED TRENCH WIDTH AT SURFACE IS 5 FEET. CENTER LINE OF TRENCH IS OFFSET APPROX. 7 FEET FROM WEST EDGE OF LEONINE STREET)
- GROUNDWATER FLOW - 2016 AVERAGE
- MONITORING WELL
- NEW MONITORING WELL

BASE MAP SOURCE:  
 LINEWORK: ACP SITE SI CI/CAS WORK PLAN ADDENDUM #1, 2011.  
 IMAGERY: ESRI.

**RECEIVED**  
**FEB 11 2019**  
**BUREAU OF WATER**



3					
2					
1					
NO.	BY	DATE	REVISION	APPD.	
PROJECT: FORMER ACP FACILITY WICHITA, KANSAS					
SHEET TITLE: PRB ALIGNMENT AND MONITORING WELL LOCATIONS					
DRAWN BY: B. IWANUK	SCALE: 1" = 50'	PROJ. NO: 20119			
CHECKED BY: B. HARTWIG	FILE NO: 2019-03-14-01-01-Figure 8.dwg				
APPROVED BY: _____	DATE PRINTED: _____	<b>FIGURE 8</b>			
DATE: MARCH 2018					
		415 South 18th St. Suite 105 St. Louis, MO 63103 Phone: 314.241.2694 Fax: 314.241.2743			