1000			WWC-5				on of Water					
			e in Well Use		_		ces App. No	1	1. 31 1	Well ID		
		WATER WELL:	Fraction NE ¼ NW ¼	NE 1/4	SW 1/4	Section	on Number 19	Towns	hip Number 27 S		ge Number □ E ■ W	
County: SEDGWICK  2 WELL OWNER: Last Name: BELL			First: KEVIN			r Rural		_				
Business: direction from nearest town or intersection): If at owner's address, check here:												
	Address: 11534 WEST 1ST CT NORTH											
Address: City: WICHITA State: KS ZIP: 67212												
-	TE WELL				60				-			
	"X" IN		completed well:60 ft. ater Encountered: 1) ft.				5 Latitude:					
SECTI	ON BOX:	2) ft.					Longitu	ide: tal Datumi	Пътсеви		(decimal degrees) 33 🏻 NAD 27	
	N	WELL'S STATIC WA	WELL'S STATIC WATER LEVEL: 19 ft.						Longitude:	LJ NAD (	33 LI NAD 27	
		below land surface	, measured on (m	io-day-	yr)7/9/2	2019	☐ GPS	(unit make	/model:			
NW -	NE		above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)				
			Pump test data: Well water was				■ Land Survey ☐ Topographic Map ☐ Online Mapper:					
W	1		Well water was ft.									
SW -	SE	after hours	r hours pumping gpm									
		Estimated Yield: 20	Estimated Yield:20gpm			6 Elevation:ft. Ground						
1	S	Bore Hole Diameter:	ore Hole Diameter:				Source:					
		O BE USED AS:	III. 10		11.							
1. Domesti			ter Supply: well	ID			10. [*] Oil F	Field Water	Supply: leas	e .		
	☐ Household 6. ☐ Dewatering: how many we					11. Test Hole: well ID .						
				echarge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
_	☐ Livestock 8. ☐ Monitoring: well ID											
	2. ☐ Irrigation 9. Environmental Remediation: well ID							a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. Industrial Recovery Injection							13. Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE?  \[ \subseteq \text{Yes} \] No If yes, date sample was submitted:												
Water well disinfected? Yes No												
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other												
Casing diameter 5 in to 60 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 23 in Weight lbs/ft. Wall thickness or gauge No. SDR-26												
TYPE OF SCREEN OR PERFORATION MATERIAL:  ☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)												
☐ Steel		ainless Steel			ed (open	hole)	[] Other	(эресну)		• • • • • • • • • • • • • • • • • • • •	***************************************	
		RATION OPENINGS AF		TOIL US	eu (open	noic)						
	nuous Slot			☐ Tor	ch Cut [	] Drill	ed Holes	Other (Sp	ecify)			
☐ Louve	ered Shutter	☐ Key Punched ☐ Wi	re Wrapped	☐ Saw	v Cut [	] None	e (Open Hole	e)				
SCREEN-	PERFORA	TED INTERVALS: From	.40 ft. to .	, eu	ft., Fro	om	ft. to	ft.,	From	ft. to .	ft.	
		CK INTERVALS: From										
Grout Intern	MATERI	AL: Neat cement 3 ft. to 26	d From	Ben Ben	tonite L	_ Othe	ft From	Α	to	Α		
		ble contamination:	и., гюн	., 1		*******	п., гюш		ω	11.		
Septic		☐ Lateral Lines	☐ Pit Pr	rivy		☐ Liv	estock Pens	1	Insecticide	Storage		
☐ Sewer	Lines	☐ Cess Pool	☐ Sewa		oon		el Storage		☐ Abandone		'ell	
Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) ☐ Direction from well? NORTH ☐ Distance from well? 90 PLUS ☐ ft.												
Direction from	Specify)	ORTH	Distance fro	om wel	 12 <b>90</b> P	LUS			ft			
10 FROM	TO	LITHOLOG		J.11 7101	FROM		TO LI	THO. LOG	(cont.) or PL	UGGING	INTERVALS	
0	2	TOP SOIL										
2	19	CLAY										
19	26	MED SAND										
26	28	CLAY										
28	40	MED SAND										
40	41	CLAY		_	MILALL							
41	60	MED SAND			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) .7/9/2019 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) 8/20/2019under the business name of WENINGER DRILLING, LLC												
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.												
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 ath ttp://www.kdheks.gov/waterwell/index.html  KSA 82a-1212  Revised 7/10/2015												