WATER WELL		Form WWC-5 Change in Well Use		sion of Water urces App. No.		Well ID FSMW-16S	
1 LOCATION OF	VATER WELL:			tion Number	Township Numb	er Range Number	
County: Sedgwid		SW 1/4 NE 1/4 NE		20	T 27 S	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:							
Address: 1000 SW Jackson St. Ste 410							
Address:	Sto	te: KS ZIP: 66612		Vestlink Shopping Center, near fenceline behind businesses at 3929-8945 W. Central Ave Wichita, KS			
City: Topeka 3 LOCATE WELL						0	
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)20.5						
SECTION BOX:		\dots ft. 3) \dots ft., or			Longitude:		
N	WELL'S STAT	TIC WATER LEVEL:	Source fo	or Latitude/Longitude			
	below land	surface, measured on (mo-	day-yr).12/18/2019				
NW NE		surface, measured on (mo-o Well water was		•• (WAAS enabled? ☐ Yes ☐ No) ☑ Land Survey ☐ Topographic Map			
W E		after hours pumping gpm			Online Mapper:		
SW SE		Well water was ft. after hours pumping					
		hours pumping d:gpm	gpm	6 Elevatio	n : 1331.63ft	. 🗌 Ground Level 🔽 TOC	
S	Bore Hole Diar	neter:	0 ft. and	Source:	Source: Z Land Survey GPS Topographic Map		
1 mile in. to ft.							
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID							
1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells?				10. ☐ Oil Field Water Supply: lease 11. Test Hole: well ID			
Lawn & Garden				Cased Uncased Geotechnical			
2. □ Irrigation 9. Environmental Remediation: well ID . 3. □ Feedlot □ Air Sparge □ Soil Vapor Ex							
4. Industrial Recovery Injection				$13. \square$ 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 Ø PVC Other CASING JOINTS: Glued Clamped Welded Ø Threaded							
Casing diameter							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
□ Steel □ Stainless Steel □ Other (Specify)							
Brass Galvanized Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: Image: Comparison of the second sec							
Continuous Slot Z 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. to ft. to ft. to ft. to							
GRAVEL PACK INTERVALS: From							
Grout Intervals: From ft. to $$							
Nearest source of possible contamination: No potential source of contamination within 200 ft.							
□ 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) .F.	nr.Dry.Cleaner				-		
		Distance from					
10 FROM TO 0 5	LIT Lithology not log	HOLOGIC LOG	FROM	TO LI	THO. LOG (cont.) of	PLUGGING INTERVALS	
5 30	Sand, m, brn	yeu					
	,,						
			Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged under my jurisdiction and was completed on (mo-day-year) .06/25/20.19 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Co	intractor's Licens	e No. 531 This	Water Well Rec	ord was comp	leted on (mo-day-y	ear) .05/0.1/2020	
Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo-day-year) .05/01/2020 under the business name of GSI Engineering, LLC.							
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.							
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212							

