

☒ Original Record ☐ Correction ☐ Change in Well Use

FSMW-19D

Well ID

1 LOCATION OF WATER WELL: County: Sedgwick		Fraction SE ¼ NW ¼ NE ¼ NE ¼	Section Number 20	Township Number T 27 S	Range Number R 1 E W															
2 WELL OWNER: Last Name: Business: KDHE BER Address: 1000 SW Jackson St., Ste. 410 City: Topeka State: KS ZIP: 66612		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: <input type="checkbox"/> Westlink Shopping Center, behind business at 8999 W. Central Ave. - Wichita, KS																		
3 LOCATE WELL WITH "X" IN SECTION BOX: <div style="text-align:center;">N <table border="1" style="margin:auto; width:100px; height:100px;"><tr><td></td><td></td><td>X</td></tr><tr><td>-- NW --</td><td></td><td>-- NE --</td></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td>-- SW --</td><td></td><td>-- SE --</td></tr><tr><td></td><td>S</td><td></td></tr></table> -----1 mile----- </div>				X	-- NW --		-- NE --	W		E	-- SW --		-- SE --		S		4 DEPTH OF COMPLETED WELL: 40 ft. Depth(s) Groundwater Encountered: 1) 20 ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 9.90 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 12/18/2019 <input type="checkbox"/> 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 40 ft. and in. to ft.		5 Latitude: 37.69249(decimal degrees) Longitude: 97.44755(decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <u>Source for Latitude/Longitude:</u> <input type="checkbox"/> GPS (unit make/model:)(WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper:	
		X																		
-- NW --		-- NE --																		
W		E																		
-- SW --		-- SE --																		
	S																			
6 Elevation: 1330.06ft. <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC <u>Source:</u> <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other																				
7 WELL WATER TO BE USED AS: 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial 5. <input type="checkbox"/> Public Water Supply: well ID 6. <input type="checkbox"/> Dewatering: how many wells? 7. <input type="checkbox"/> Aquifer Recharge: well ID 8. <input checked="" type="checkbox"/> Monitoring: well ID FSMW-19D 9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify):																				
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																				
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 2 in. to 30 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 0 in. Weight lbs./ft. Wall thickness or gauge No. 40..... TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) SCREEN-PERFORATED INTERVALS: From 30 ft. to 40 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 28 ft. to 40 ft., From ft. to ft., From ft. to ft.																				
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. Nearest source of possible contamination: No potential source of contamination within 200 ft. <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 checked="" type="checkbox"/> Other (Specify) Emr.Dry.Cleaner..... Direction from well? East Distance from well? 370 ft.																				
10 FROM		TO		LITHOLOGIC LOG																
				FROM																
				TO																
				LITHO. LOG (cont.) or PLUGGING INTERVALS																
0		5		Lithology not logged																
5		8		Lean Clay, silty, brn																
8		25.5		Sand, f to m to c, brn																
25.5		27.7		Clay, v silty, gry																
27.7		32		Sand, c to m																
32		40		Lean Clay, sandy, tn-gry to gry																
				Notes:																
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 07/02/2019..... and this record is true to the best of my knowledge and belief. 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..... <div style="font-size: small; text-align: center;">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</div>																				



Legend

- OE OVERHEAD ELECTRIC & CABLE TV LINE
- W WATER LINE
- GAS GAS LINE
- C UNDERGROUND TELEPHONE LINE
- SS SANITARY SEWER LINE
- MONITORING WELL
- IAS WELL
- SVE WELL



ALL LOCATIONS AND BOUNDARIES ARE APPROXIMATE



FIGURE: XX.XX	FIGURE NAME: SITE BASE MAP
DATE: 02-07-20	PROJECT NUMBER: 1874118
DRAWN BY: RN	PROJECT MANAGER: SGE

FORMER FOUR SEASONS
8947 WEST CENTRAL
WICHITA, KANSAS
KDHE #: C2-087-73100