WATER WELL RECORD Form WWC-5						sion of Water					
		Correction				irces App. No		Well ID	ige Number		
		VATER WEI	LL:	Fraction NE ¹ / ₄ SW ¹ / ₄ SE ¹ / ₄		ion Number 5	Township Numb		ige Number □ E ■ W		
	SEDGWI		ICAMODI								
2 WELL OWNER: Last Name: GRISAMORE First: BENJAMIN 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: 2216 N. CHADSWORTH ST.											
Address: City: WICHITA State: KS ZIP: 67205											
City:	WICHITA E WELL				OF 0		27 724				
	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)										
	SECTION BOX: 9 2) 9 or 4) FI Dru						Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27				
l N	WELL'S STATIC WATER LEVEL:29						for Latitude/Longitude	2:			
	below land surface, measured on (mo-day-yr).					■ GP	S (unit make/model:	I-PHONE)		
NW	above land surface, measured on (mo-day-yr)					(WAAS enabled? Tyes No)					
	Pump test data: Well water was					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
W	Е	Well water was ft.				Chinic Mapper					
1 1 1	SE			s pumping	gpm	6 Florest	ion: 6	- Cropp	d Level D TOC		
	Estimated Yield:gpm				01	6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ■ GPS ☐ Topographic Map					
	S Bore Hole Diameter:12 in. to85 ft in. to ft.					Other					
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Public Water Supply: well ID											
	☐ Household 6. ☐ Dewatering: how many wells?					11. Test Hole: well ID					
1	■ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?					
2. Irrigati	☐ Livestock 8. ☐ Monitoring: well ID					a) Closed Loop Horizontal Vertical					
, – -	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extr					b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ O							ner (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											
8 TYPE OF CASING USED: □ Steel ■ PVC □ Other □ CASING JOINTS: ■ Glued □ Clamped □ Welded □ Threaded Casing diameter 5 in. to 85 ft., Diameter in. to ft., Diameter in. to ft., Diameter ft. Casing height above land surface 12 in. Weight 2.35 lbs/ft. Wall thickness or gauge No. SDR26											
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 Gauze Wrapped Torch Cut Drilled Holes Other (Specify)											
☐ Continuous Stot ☐ Mill Stot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drifted Holes ☐ Other (Specify)											
SCREEN-PERFORATED INTERVALS: From .70											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other											
Grout Intervals: From 4 ft. to .24 ft., From ft. to ft., From ft. to ft.											
Nearest source of possible contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage											
Sewer		_	Cess Pool	☐ Sewage Lag	_	Fuel Storage	_	ioned Water			
■ Watertight Sewer Lines											
☐ Other (Specify) Direction from well? WEST Distance from well? 15'+ ft.											
10 FROM	TO		LITHOLO		FROM		LITHO. LOG (cont.) o		IG INTERVALS		
0	3	TOP SOIL		J-0 200	2110111						
3	20	CLAY									
20	50	FINE SAND)								
50	67	CLAY									
67	85	MEDIUM S	AND		 						
	-				Notas						
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) 4-10-2023 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo-day-year) 4-20-2023											
Kansas W	ater Well C	ontractor's Li	cense No. Neli and E	236 This Warning Service, Inc	ter Well Rec	ord was con	npieted on (mo-day-) ld S Harn	year) 4:40:	-KNK3		
Mail	1 white copy	along with a fee o	f \$5.00 for ea	ach constructed well to: Kar	sas Department	of Health and	Environment, Bureau of V	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 at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									d 7/10/2015		