| WATER WELL RECORD Form WWC-5 | | | | | vision of Water | 1 | ValLID | |
|---|--|--|-------------------------------|-----------------------------------|--|--|-----------------------------------|--|
| ➤ Original Record ☐ Correction ☐ Change in Well Use 1 LOCATION OF WATER WELL: Fraction | | | | Resources App. No. Section Number | | Township Number | Well ID Range Number | |
| 1 LOCATION OF WATER WELL: Fraction County: Sedgwick Fraction SE 4 SW 4 NW 4N | | | | | | | | |
| 2 WELL OWNER: Last Name: ENDICOTT First: Rebecca Street or Rural Address where well is located (if unknown, distance and | | | | | | | | |
| Business: direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | |
| Address: 10134 W. Bella Vista Ct. | | | | | | | | |
| Address: | | C. Vone | 200 ZID 67000 | | | | | |
| | <u>Wichita</u> | State: Name | sas ZIP: 67202 | | | | | |
| 3 LOCATI WITH " | | | APLETED WELL: 🖇 | | | | (decimal degrees) | |
| SECTIO | | | Encountered: 1) | | Longitude: -9746041 (decimal degrees) | | | |
| 1 | 2) ft. 3) ft., or 4) 🗆 l WELL'S STATIC WATER LEVEL: 28 | | | | | | \square NAD 83 \square NAD 27 | |
| | well static water level: 49 | | | | Source fo | Source for Latitude/Longitude: GPS (unit make/model: I-Phone) | | |
| ×-NWNE above land | | | , measured on (mo-day-yr) | | | (WAAS enabled? ☐ Y | | |
| \W | NE | | test data: Well water was ft. | | | ☐ Land Survey ☐ Topographic Map | | |
| | | | rs pumpingg | pm | | | | |
| SW | SE | | Well water was ft. | | | | | |
| 3W | SE | after hours pumping gpm | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | |
| | <u> </u> | Estimated Yield:gpm Bore Hole Diameter: 12in. to 85ft. and | | | | Source: Land Survey GPS Topographic Map | | |
| | s mile | | in. to | | | Other | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | |
| 1. Domestic: | | | ater Supply: well ID | | | ield Water Supply: lease | | |
| |] Household 6. \square Dewatering: how many wells? | | | | | | | |
| | Lawn & Garden 7. Aquifer Recharge: well ID | | | | | | | |
| Livest | | | ng: well ID | | | | | |
| 2. ☐ Irrigat 3. ☐ Feedlo | | 9. Environmen Air Sparg | tal Remediation: well ID ge | | b) Open Loop Surface Discharge Inj. of Water | | | |
| 4. Industrial Recovery Injection 13. Other (specify): | | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted: | | | | | | | | |
| Water well disinfected? Wes No | | | | | | | | |
| 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other | | | | | | | | |
| Casing diameter | | | | | | | | |
| Casing height above land surface | | | | | | | | |
| 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) | | | | | | | | |
| ☐ 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 65 ft. to 85 ft., From ft., From ft. ft. | | | | | | | | |
| GRAVEL PACK INTERVALS: From 24 ft. to 85 ft., From ft. to ft. From ft. ft. o ft. | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | |
| Grout Intervals: From4 | | | | | | | | |
| Nearest source of possible contamination: ☐ Sentic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage | | | | | | | | |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well | | | | | | | | |
| | tight Sewer L | | | | Fertilizer Stora | | | |
| Other (Specify) | | | | | | | | |
| Direction from well? West | | | | | | | | |
| 10 FROM | ТО | | OGIC LOG | FROM | TO L | TIHO, LOG (cont.) or P | LUGGING INTERVALS | |
| 0 | 3 | topsoil clay | | - | | | | |
| 3 28 | 28 42 | fine sand | | | | | | |
| 42 | 60 | clay | | | | | | |
| 60 | | medium 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) 9.7./.2.2.2.3 and this record is true to the best of my knowledge and belief. | | | | | | | | |
| Kansas Water Well Contractor's License No236 This Water Well Record was completed on (mo-day-year) 7.7.8./2023 under the business name of | | | | | | | | |
| under the | business nar | ne of | Vell and Pump Servi | e | signature. Todo | S.H arp | | |
| Mail 1 | white copy alor | ng with a fee of \$5.00 for eac | h constructed well to: Kansa | as Department | of Health and Env | ironment, 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 | | | | | | | | |