| WATER WELL R | | m WWC-5 | | sion of Water | | | | |
|---|---------------------------------------|-----------------------------------|--|------------------------------------|---|--------------|----------------------|--|
| Original Record | | hange in Well Use | | irces App. No. | | Well ID | 37 1 | |
| 1 LOCATION OF W County: SEDGWIG | | Fraction SE'4 SW'4 SE'4 | Į. | ion Number 26 | Township Number T 27 S | | ge Number □ E ■ W | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and | | | | | | | | |
| Business: CUSTOM TOUCH LAWN AND LANDSCAPE direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | |
| Address: 700 S HAWKINS LN 14513 W MCCORMICK | | | | | | | | |
| Address: City: GODDARD State: KS ZIP: 67052 WICHITA, KS 67235 | | | | | | | | |
| A LOCATE WILL | | | | | | · · · · · | | |
| WITH "X" IN | 4 DEPTH OF C | COMPLETED WELL: | 14V ft. | | • | | | |
| SECTION BOX: | Depth(s) Groundwater Encountered: 1) | | | | Longitude: | | | |
| N | WELL'S STATIC | WATER LEVEL:3 | | r Latitude/Longitude | | 83 LI NAD 21 | | |
| | below land sur | rface, measured on (mo-day- | GPS (unit make/model:) | | | | | |
| NW NE | above land sur | rface, measured on (mo-day- | (WAAS enabled? ☐ Yes ☐ No) | | | | | |
| | | ell water was f | ☐ Land Survey ☐ Topographic Map | | | | | |
| W | | hours pumping Vell water was f | ☐ Online Mapper: | | | | | |
| SW SE | after hours pumping gpm | | | | | | | |
| | Estimated Yield: | gpm 120 | 6 Elevation: | | | | | |
| S | Bore Hole Diamete | er: 9.5 in to 120 | Source: Land Survey GPS Topographic Map Other | | | | | |
| mile in. to ft. | | | | | | | | |
| 1. Domestic: | | c Water Supply: well ID | | 10 □ Oil Fi | eld Water Sunnly le | ase | | |
| ☐ Household | | tering: how many wells? | | 10. Oil Field Water Supply: lease | | | | |
| Lawn & Garden | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | |
| ☐ Livestock | | toring: well ID | | 12. Geothermal: how many bores? | | | | |
| 2. Irrigation | 9. Environmental Remediation: well ID | | | | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | |
| 3. ☐ Feedlot 4. ☐ Industrial | | | extraction | | | | | |
| 4. ☐ Industrial ☐ Recovery ☐ Injection ☐ 13. ☐ Other (specify): | | | | | | | | |
| Was a chemical bacteriological sample submitted to KDHE? Yes No 11 yes, date sample was submitted: Water well disinfected? Yes No | | | | | | | | |
| 2 TVPF OF CASING USED: □ Steel ■ PVC □ Other CASING IOINTS: ■ Glued □ Clamped □ Welded □ Threaded | | | | | | | | |
| Casing diameter 5 in. to 120 ft., Diameter in. to ft., Diameter in. to SDR-26 in. Weight in. Weight Wall thickness or gauge No. SDR-26 | | | | | | | | |
| 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 | | | | | | | | |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From .31 | | | | | | | | |
| GRAVEL PACK INTERVALS: From 23 ft. to 120 ft., From ft. to ft., From ft., From ft. | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | |
| Grout Intervals: From | | | | | | | | |
| Septic Tank | | | | | | | | |
| ☐ 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) Direction from well? Distance from well? ft. | | | | | | | | |
| 10 FROM TO | | PLOGIC LOG | FROM | | THO. LOG (cont.) or | | GINTERVALS | |
| | TOP SOIL | LOGIO EUG | 1110111 | | DOG (COME.) OF | | - HILLIAMO | |
| | CLAY | | | | | | | |
| | INE SAND | | | | · · · · · · · · · · · · · · · · · · · | | | |
| | SHALE | | | | | | | |
| | | | 1 | | | | | |
| | | | | | | | | |
| | | | 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) 94/15/2016 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) 04/18/2016 under the business name of WENINGER DRILLING, LLC | | | | | | | | |
| under the business name of WENINGER UKILLING. LLC | | | | | | | | |
| 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-121. | | | | | | | 7/10/2015 | |