WATER WELL		orm WWC-5		ision of Water				
Original Record				ources App. No.		Well ID		
1 LOCATION OF		Fraction		tion Number	Township Numb			
County: SEDGWICK SW¼ SW¼ NW¼ SE¼ 36 T 27 S R 2 □ E								
2 WELL OWNER: Last Name: MOBLEY First: CLIFTON Street or Rural Address where well is located (if unknown, distance and								
Business: Address: 12714 WEST GRANT COURT direction from nearest town or intersection): If at owner's address, check here:								
Address:								
City: WICHI	A Stat	e: KS ZIP: 67235						
3 LOCATE WELL	4 DEPTH OF	COMPLETED WEL	л. 120 п	5 Latitude		(decimal degrees		
WITH "X" IN	Double(s) Consumbration Engagement (1)					Longitude:(decimal degrees)		
SECTION BOX: N Depth(s) Groundwater Encountered: 1)					Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27			
WELL'S STATIC WATER LEVEL: ft. Source for Latitude/Longitude:								
below land surface, measured on (mo-day-yr) GPS (unit make/model:								
above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)			
Pump test data: Well water was					☐ Land Survey ☐ Topographic Map			
777-11 4					☐ Online Mapper:			
afterhours pumping gpm								
	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter:10.5 in. to120 ft. and				Source:			
1 mile in. to ft.								
7 WELL WATER TO BE USED AS:								
1. Domestic: Household	The state of the s				10. Oil Field Water Supply: lease			
■ Lawn & Garden			S:	11. Test Hole: well ID				
Livestock	☐ Livestock Aquiter Recharge: Well ID				12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction			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? ■ Yes □ No								
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other								
Casing diameter								
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)								
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From .50 ft. to .120 ft., From ft., From ft., From ft.								
GRAVEL PACK INTERVALS: From23 ft. to120 ft., From ft. to ft. to ft. to								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From								
Grout Intervals: From	3 ft. to23	3 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 Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ■ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedvard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
■ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)								
Direction from well?	AST	Distance from	m well? 18		Α			
10 FROM TO	LITH	OLOGIC LOG	FROM	TO LIT	THO. LOG (cont.) or	PLUGGING INTERVALS		
.0 1	TOP SOIL							
1 10	CLAY							
10 15	FINE SAND							
15 38	CLAY							
38 42	MED SAND							
42 53	CLAY							
53 105	GRAY SHALE		Notes:		A31 37			
105 107 GYP Well ONLY								
107 120 GRAY SHALE								
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) .8/22/2018 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) .9/5/2018 under the business name of WENINGER DRILLING LLC								
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.								
1000 SW Jackson	St., Suite 420, Topeka.	Kansas 66612-1367. Mail on	e to Water Well Own	er and retain one to	or your records. Telenno	one 785-296-5524.		