			Form WWC-5		Division of Wat	·-			
▼ Origin		Correction Chang				ources App. No. Well ID			
		ATER WELL:	l i		Section Numb	10op .			
County: Sedgwick			SW 4SW 4NE						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
Business: KLAUSMEYER CONSTRUCTION LLC direction from pearest town or intersection). If at owner's address, check here:									
Address: 10008 W. York Address:									
	With a but the	Ctata Kana	20 7ID 6501 F	1012 N	1012 N. Casado Ct. Goddard, Kansas 67052				
	Wichita	State: Karis	as ZIP: 67215						
3 LOCAT		4 DEPTH OF COM	PLETED WELL:	70	ft 5 Latit	udo: 37 66807	(decimal degrees)		
D 1/10									
	N BOA.		3) ft., or 4)				1.3. (decimal degrees)		
	11	WELL'S STATIC WAT	ER LEVEL: 25	fl		zontai Datum: 🖃 w ze for Latitude/Longi	GS 84 \square NAD 83 \square NAD 27		
		below land surface,	measured on (mo-day-	vr)07/05/22			el: i.Phone)		
NW	NE	☐ above land surface,	measured on (mo-day-	yr)	. 📛`	•	d? \(\text{Yes} \text{No} \)		
		Pump test data: Well w	Pump test data: Well water was ft.			and Survey T	onographic Man		
w	E	after hour	after hours pumping gpm			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	SE	Well w	Well water was ft.			sinne mapper	,,		
sw	SE	after hour	after hours pumping gpm						
L		Estimated Yield:	Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC			
1	S	Bore Hole Diameter: 12	. ft. and	Source: Land Survey 🗷 GPS 🗌 Topographic Map					
	mile								
7 WELL WATER TO BE USED AS:									
1. Domestic:		5. 🗌 Public Wa	ater Supply: well ID		10. 🗆 C	il Field Water Sunr	oly: lease		
☐ House		Dewaterin	6. Dewatering: how many wells?						
_	& Garden	7. 🗌 Aquifer R	7. ☐ Aquifer Recharge: well ID ☐ Cased ☐ Uncased ☐ Geotechnical						
1	☐ Livestock 8. ☐ Monitoring: well ID								
	2. ☐ Irrigation 9. Environmental Remediation: well ID								
3. Peedlot Air Sparge Soil Vapor Extraction b) Open Loop Surface Discharge Ini. of Water							ce Discharge		
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	_			o sample was sae	mittod:		
8 TYPE O	F CASING	USED: ☐ Steel ■ PV	C \(\text{Other} \)	CA	SING JOINT	Col Clust Cl	amped Welded Threaded		
Casing diam	eter 5	in. to7.9 ft.,	Diameter	in to		noton	imped in weided in Threaded		
1 C. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
Casing neight above land surface									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)									
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
Louvered Shutter Key Punched Wire Wranned Sey Cut None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From 50									
GRAVEL PACK INTERVALS: From 24 ft. to 70 ft., From ft. to ft., From ft. to ft.									
9 GROUT MATERIAL: Nest cement Cement grout P Pontonito College									
9 GROUT MATERIAL: □ Neat cement □ Cement grout ■ Bentonite □ Other Grout Intervals: From									
Nearest source of possible contamination:									
Sentic Tank									
Communities Divestock Lens Direction Storage									
Wotertight Sough Lines									
Other (Specify)		_ ,			_	il Well/Gas Well		
Direction fro	om well? So t	ıth	Distance from we	 ? 25 ft	plus		fr		
10 FROM	TO	LITHOLOG	GIC LOG	FROM	ТО	LITHO LOG (cor	nt.) or PLUGGING INTERVALS		
0		topsoil	-	TRUM	10	EIIIO, EOG (COI	in, of Logomo intervals		
		clay		-					
	-	fine sand							
		medium sand							
53		gray shale					-		
		21 0.1076							
				Notes:					
11 CONTRACTIONS OF A STREET									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo day year) 07/05/2022									
under my jurisdiction and was completed on (mo-day-year) 0.7.7.05.7.2022 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No236 This Water was completed on (mo-day-year) 7.7.7.2022									
Kansas wat	er wen Con	tractor's License No 🗾 🗸	200 This Water	Wall Decor	t was asmalat	ad an (maa dari rica	\ フ /フ /クロクク		
direct the C	usings nam	COL Haid vve	arau cumu servi	(:⊢ \	Lionofiiro 'IA	an s wearn			
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	y://www.kdhab	s gov/waterwall/index html	ia 1507. Iviali Une lu Wal			or your records. Telep			
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									