| WATER WELL RI | | WWC-5 | | ision of Water | | | |
|---|---|----------------------|------------------|---|--|--|--|
| ➤ Original Record | | ge in Well Use | Reso | ources App. N | o. Well ID | | |
| 1 LOCATION OF WA | | Fraction | Sec | tion Number | 1 1 | | |
| County: Sedgwick Sw ¼NE ¼SE ¼SW ¼ 36 T 27 S R 2 □ E ■ W | | | | | | | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and | | | | | | | |
| Business: KLAUSMEYER CONSTRUCTION LLC direction from nearest town or intersection): If at owner's address, check here: | | | | | | | |
| Address: 10008 W. York | | | | | | | |
| Address: 13006 W. Blake Ct. Wichita, Kansas 67235 | | | | | | | |
| City: Wichita | State: Kans | as ZIP: 67215 | 13006 W. | Blake Ct | . Wichita, Ransas 6/235 | | |
| 3 LOCATE WELL | 4 DEPTH OF COMPLETED WELL: 130 ft. | | | | 1 27 65216 | | |
| WITH "X" IN | | | | | de: 37.65216 (decimal degrees) | | |
| SECTION BOX: | Depth(s) Groundwater Encountered: 1) | | | Longitude: -97.49174 (decimal degrees) | | | |
| N | 2) II. | 3) ft., or 4) ∟ | Dry Well | | | | |
| | WELL'S STATIC WAT | TER LEVEL: 45 | II. \08/31/22 | Source for Latitude/Longitude: | | | |
| | below land surface, measured on (mo-day-yr) 0.8/3 | | | | | | |
| NWNE | above land surface, measured on (mo-day-yr) | | | | (WAAS enabled? ☐ Yes ☐ No) | | |
| | Pump test data: Well water was ft. | | | | and Survey Topographic Map | | |
| W E | after hours pumping gpm | | | | nline Mapper: | | |
| SW SE | Well water was ft. | | | | | | |
| × | after hours pumping | | | 6 Elevat | 6 Elevation :ft. ☐ Ground Level ☐ TOC | | |
| S | | | | Source: Land Survey GPS Topographic Map | | | |
| mile | | | | | Other | | |
| | | | | | | | |
| 7 WELL WATER TO | | . 0 | | | 12.11. | | |
| 1. Domestic: | 5. Public Water Supply: well ID | | | | 10. Oil Field Water Supply: lease | | |
| Household | | | | 11. Test Hole: well ID | | | |
| Lawn & Garden | | echarge: well ID | | | | | |
| Livestock | | ng: well ID | | 12. Geothermal: how many bores? | | | |
| 2. Irrigation | 9. Environmental Remediation: well ID | | | | | | |
| 3. Feedlot | | | | | 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 5 in. to 130 ft., Diameter in. to ft. | | | | | | | |
| Casing height above land surface | | | | | | | |
| Casing height above land surface12 | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| ☐ 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 90 ft. to 130 ft., From ft. to ft. to ft. | | | | | | | |
| SCREEN-PERFORATE | ED INTERVALS: From | n 89 ft. to 139 | ft., From . | ft. to |) ft., From ft. to ft. | | |
| GRAVEL PACK INTERVALS: From 24 ft. to 130 ft., From ft. to ft., From ft. to ft. | | | | | | | |
| 9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other | | | | | | | |
| Grout Intervals: From4 | | | | | | | |
| 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 ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | |
| ☐ Other (Specify) | | | | | | | |
| Direction from well? Sout | | | ? 2.Qft | plus | ft. | | |
| 10 FROM TO | LITHOLO | | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS | | |
| 0 3 t | opsoil | | | | | | |
| | lay | | | | | | |
| | ray shale | | | | | | |
| 3 | | | | | | | |
| | | | 1 | | | | |
| | | | | | | | |
| | | | 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) 08/31/2022, 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) 9/2/2022 | | | | | | | |
| under the business name | e ofHarp.VV | ell and Pump Servic | æSi | gnatureሂዷ | ld S.Harp | | |
| 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 | | | | | | | |