	WELL P			WWC-5			on of Water			,	11 77-		
				e in Well Use	Resources App. No. Section Number				NT1		11 ID	NT1	
1 LOCATION OF WATER WELL: County: SEDGWICK				Fraction NW1/4 SF 1/4 SE 1/4	Fraction Section N $NW\frac{1}{4}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$ 25			r Township Number T 27 S			er Range Number R 2		
2 WELL OWNER: Last Name: O'NEAL					Street or Rural Address where well is locate								
Business		ast Haine.	111111	direction from nearest town or intersection): If at owner's address, check here:									
Address: 613 S. LIMUEL CIR.													
Address:	: WICHITA		State: KS	ZIP: 67235									
3 LOCA					:70 ft. 5 Latitude: 37.67262(decim								
SECTION POY.  4 DEPTH OF COMPLETED WELL:70								Longitude: -97.49156 (decimal degrees)					
	SECTION BOX: 2)											(decimal degrees) 83 $\square$ NAD 27	
WELL'S STATIC WATER LEVEL:30							Source	or Latitude/Lo	ngitude	e:			
		below	land surface	measured on (mo-day-yr)6-8-2023.				GPS (unit make/model: I-PHONE)					
Dymn tost date: Wall w				measured on (mo-day-yr) rater was ft.				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
w -	<b>X</b>   E			s pumping	ine Manner.	ne Mapper:							
1 1 1		vater was f	s ft.										
SW -	SE			pumping gpm 6 Elevati				on.	f	+ 🗆 (	Fround	Level TOC	
	S	gpm 12 in to 70							ppographic Map				
S Bore Hole Diameter:12 in. to70 ft. and													
7 WELL WATER TO BE USED AS:													
1. Domesti	c:	5. [	☐ Public Wa	ater Supply: well ID									
Hous				ng: how many wells?		11. Test Hole: well ID							
Lawn	& Garden	echarge: well ID	rmal: how mar										
	2. Irrigation  9. Environmental Remediation:												
3. ☐ Feedl		_	Air Sparg						Surface Discharge				
4. 🗌 Indus			Recovery										
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:													
Water we	ll disinfected	Yes L	No	7G T 01	<u> </u>	CINIC	T IONITE.	<b>P</b> Cl. 1 <b>C</b> (	71		W/-1.1-	d [ Thursdad	
8 TYPE OF CASING USED: Steel PVC Other Gallow CASING JOINTS: Glued Clamped Welded Threaded													
Water well disinfected? ■ Yes □ No  8 TYPE OF CASING USED: □ Steel ■ PVC □ Other													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)													
Bras	s ∐ Gal OR PERFOI	vanized Steel			ised (open l	nole)							
	tinuous Slot	Mill Slot		iauze Wrapped 🔲 To	rch Cut [	7 Dri	lled Holes	☐ Other (Spec	ifv)				
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ■ Saw Cut ☐ None (Open Hole)													
SCREEN-PERFORATED INTERVALS:       From50													
(	GRAVEL PA	CK INTERV	ALS: From	m24 ft. to7.0	ft., Fro	m	ft. to	ft., F	rom		ft. to	ft.	
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 4 ft. to .24 ft., From ft. to ft., From ft. to ft.													
	rvais: From ource of possib			II., FIOIII	11. 10	• • • • • • •	11., FIOIII	n. u	,		. 11.		
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage													
☐ Sewe	r Lines		Cess Pool	☐ Sewage La			uel Storage			doned			
Wate	rtight Sewer L	ines [	Seepage Pi	t		⊔F	ertilizer Stor	age ∐		ell/Ga	s well		
☐ Other (Specify) Direction from well? NORTH Distance from well? 40'+  ft.													
10 FROM	ТО		LITHOLO		FROM		TO 1	LITHO. LOG (	cont.)	or PLU	JGGIN	G INTERVALS	
0	3	TOP SOIL											
3		CLAY										M	
20	30	FINE SAND	)	7964-00-00-00-00-00-00-00-00-00-00-00-00-00	-								
30 50	50 70	CLAY MEDIUM S	AND			-		***************************************					
30	10	אורטוטואו פ	VIAD			-							
						Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged and this record is true to the best of my knowledge and belief													
under my jurisdiction and was completed on (mo-day-year) 6-8-2023 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) 6-10-2023													
under the business name of Harp Well and Pump Service, Inc. Signature Todd 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,													
				ach constructed well to: Ka s 66612-1367. Mail one to									
	ittp://www.kdhel			s 66612-1367. Mail one to	KSA 82a			- Tot your record	J. 1 CIC			1 7/10/2015	