

CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: None Given

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NE NE SE

County: Sedgwick

Location changed to:

10-285-1W

NE NE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well owner's address, city street map,
and mapping tool on KGS website.

initials: DRS date: 6/9/2009

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:

County: Sedgwick

Fraction

NE 1/4 NE 1/4 SE 1/4

Section Number

Township Number

Range Number

Distance and direction from nearest town or city street address of well if located within city?

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____

Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

2 WATER WELL OWNER:

RR#, St. Address, Box # : Delbert Wise
3640 S. Gilda Ct.
City, State, ZIP Code : Wichita, KS

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	
-- NW --	-- NE --
W	E
-- SW --	-- SE --
S	

X

4 DEPTH OF COMPLETED WELL 55 ft.

Depth(s) Groundwater Encountered (1) 26 ft. (2) ft. (3) ft.WELL'S STATIC WATER LEVEL 26 ft. below land surface measured on mo/day/yr. 12/21/08

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield gpm: Well water was ft. after hours pumping gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No ☒; If yes, mo/day/yr
Sample was submitted Water well disinfected? Yes No ☒

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued ☒ Clamped
2 PVC	4 ABS	7 Fiberglass		Welded
				Threaded

Blank casing diameter 5 in. to 55 ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface 12 in., Weight 160 lbs./ft. Wall thickness or gauge No. 26

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	7 PVC	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RMP (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 35 ft. to 55 ft., From ft. to ft.

From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 24 ft. to 55 ft., From ft. to ft.

From ft. to ft., From ft. to ft.

6 GROUT MATERIAL:

1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From 4 ft. to 24 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	15 Oil well/gas well	

Direction from well? north How many feet? 14

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 2 TOPSOIL

2 21 Clay

21 53 med sand

53 55 Tan Shale

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 12/21/08 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/year) 11/21/09 under the business name of Chase Drilling by (signature) D. Chase

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.