

MW 14651

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: Fraction NW 1/4 NE 1/4 NE 1/4 NE 1/4 Section Number 83 Township No. T 28 S Range Number R 1 E W

County: Sedgwick

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
1000' W of intersection of S Ridge & W 63rd. S side of Rd

2 WATER WELL OWNER: Oxigen RR#, Street Address, Box #: 6300 S. Ridge Rd City, State, ZIP Code: Wichita, KS 67215

Global Positioning System (GPS) information:
Latitude: N 37.57839 (in decimal degrees)
Longitude: W 97.42723 (in decimal degrees)
Elevation: _____
Datum: WGS 84, NAD 83, NAD 27
Collection Method:
 GPS unit (Make/Model: Garmin Etrex 20)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

3 LOCATE WELL WITH AN "X" IN SECTION BOX:
N
W

| | | | |
|--|--|--|-------------------------------------|
| | | | <input checked="" type="checkbox"/> |
| | | | |
| | | | |
| | | | |

 E
S
[---] 1 mile [---]

4 DEPTH OF COMPLETED WELL 101' ft.
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr.....
Pump test data: Well water was..... ft. after..... hours pumping..... gpm
EST. YIELD..... gpm. Well water was..... ft. after..... hours pumping..... gpm
Bore Hole Diameter..... in. to..... ft. and..... in. to..... ft.
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Domestic-lawn & garden 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: Steel PVC Other.....
CASING JOINTS: Glued Clamped Welded Threaded
Casing diameter 2 in. to 9 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
Casing height above land surface..... 30 in., Weight..... 7 lbs./ft., Wall thickness or gauge No. sch 40
TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel PVC Other (Specify).....
 Brass Galvanized Steel None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify).....
SCREEN-PERFORATED INTERVALS: From 91 ft. to 101 ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.
GRAVEL PACK INTERVALS: From 89 ft. to 101 ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.....
Grout Intervals: From 85 ft. to 89 ft., From 0 ft. to 85 ft., From..... ft. to..... ft.
What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well
Direction from well..... Distance from well.....

| FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|------|-----|---|------|----|--|
| 0 | 15 | Brown Lean Clay | | | |
| 15 | 32 | Brown Fin to Med Sand | | | |
| 32 | 39 | Brown Lean Clay | | | |
| 39 | 66 | Brown Fin to coarse Sand | | | |
| 66 | 94 | Brown Lean Clay | | | |
| 94 | 102 | Brown Sand clay Sand clay | | | |
| 102 | 108 | Gray clay | | | |
| 108 | | shale | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATE This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 9-23-17 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 597 This Water Well Record was completed on (mo/day/year) 9-26-17 under the business name of Cascade Drilling, L.P. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.