	WELL			WWC-5			sion of Water					
		Correction		ge in Well Use			irces App. No		Well ID	N. I.		
1 LOCATION OF WATER WELL: County: SEDGWICK				Fraction SE¼ NE¼ SW	Section Number 6			Township Nu T 28		nge Number 1 □ E ■ W		
	OWNER: 1			First:	Street or Rural Address where well is located (if unknown, distance and							
Business	RAIN PL	JS		i not.		direction from nearest town or intersection): If at owner's address, check here:						
		ELLOGG DR			•	10812 W YOSEMITE						
Address: City:	WICHITA		State: KS	ZIP: 67218	1		S 67215					
2 LOCATE WELL							1					
WITH		4 DEPTH	OF CON	MPLETED WELL:	60	ft.		le:				
				water Encountered: 1)35 ft. ft. ft. 3) ft., or 4) \(\bigcup \) Dry Well			Longitude:					
]	N	WEI I 'S ST	······· II.	3) π., or 4) TER LEVEL:	∐ Dry W 33	ell				83 □ NAD 27		
		below la	and surface	e, measured on (mo-day	v-vr) 09/22	/2016		for Latitude/Longite S (unit make/model		,		
NW	NE	above la	ind surface	, measured on (mo-day	y-yr)	•••••		(WAAS enabled?				
		Pump test da	Pump test data: Well water was 3 ft.				☐ Land Survey ☐ Topographic Map					
w	E	after	after				Online Mapper:					
sw	SE	well water was ft. afterbours pumping gp										
	9	Estimated Y	Estimated Yield: 50gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC				
	S	Bore Hole D	Bore Hole Diameter:10.5 in. to60				nd Source: ☐ Land Survey ☐ GPS ☐					
11				in. to	ft.			☐ Other				
7 WELL WATER TO BE USED AS:												
1. Domestic	<u> </u>											
House		g: how many wells?echarge: well ID			11. Test Hole: well ID							
. —					g: well ID			rmal: how many be				
, —					Remediation: well ID			sed Loop Horiz				
	3. ☐ Feedlot ☐ Air Sparge							b) Open Loop Surface Discharge Inj. of Water				
4. 🔲 Indust	rial		☐ Injection	ion 13. 🗆 Other (specify):				•••••				
Was a chemical/bacteriological sample submitted to KDHE? Tes 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 60 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12 in Weight lbs./ft. Wall thickness or gauge No. SDR-26												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
Steel Stainless Steel Fiberglass ■ PVC Other (Specify)												
☐ 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 .30 ft. to .45 ft., From ft. to ft., From ft. to ft. gravel pack intervals: From 23 ft. to .60 ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest sou	rce of possib	ie contaminatio	n:									
Septic			ateral Line				Livestock Pens	_	cticide 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)												
☐ Other (Specify) Direction from well? NORTH Distance from well? .10.												
10 FROM	TO		ITHOLO	GIC LOG	FRO	M	TO L	ITHO. LOG (cont.	or PLUGGIN	G INTERVALS		
0		TOP SOIL										
1		CLAY										
18		FINE SAND										
22 30		MED SAND	MED GRAVEL									
43		CLAY	iL			-+						
70	00	<u> </u>			Note	L	<u>-</u>					
170003												
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) .09/22/2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 884 This Water Well Record was completed on the day-year) .09/26/2016												
under the h	iter Well Co	ntractor's Lice	nse No. 9 GER DRI	ILLING, LLC	ater Wel	Keco	ord was com	ected on the day	-year) 119/25	1/2U.16		
Mail	1 white copy al	ong with a fee of S	5.00 for each	ch constructed well to: Ka	ansas Depar	tment o	f Health and Fr	vironment. Bureau of	Water, GWTS	Section.		
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											