|  | R WELL R   |                 |  | WWC-5                  |                                       |   | vision of Water  | 1  |               |   |  |
|--|--|-----------------|--|------------------------|---------------------------------------|---|--|--|---------------|---|--|
| Original Record Correction Change in Well Us   |  |                 |  |                        |                                       | Res   |  | Well ID  | NII           |   |  |
| 1 LOCATION OF WATER WELL: Fraction NW 1/2 NW 1/2   |  |                 |  |                        | SW 1/                                 | Section Number   Township Number   Range Number   T 28 S   R 1 $\square$ E $\blacksquare$ W |  |  |               |   |  |
| County: SEDGWICK  NW 1/4 NW 1/4 NE 1/4   6   T 28 S   R 1   E    WELL OWNER: Last Name:  First: Street or Rural Address where well is located (if unknown, distance a  |  |                 |  |                        |                                       |   |  |  |               |   |  |
|  | : MAIZE RO   |                 |  | PRSt.                  |                                       | direction from nearest town or intersection): If at owner's address, check here:            |  |  |               |   |  |
| Address: PO BOX 75337  |  |                 |  |                        |                                       | 2633 SOUTH LARK CT. WICHITA, KS,  |  |  |               |   |  |
| City: WICHITA State: KS  3 LOCATE WELL   |  |                 |  | ZIP: 67275             | P: 67275                              |   |  |  |               |   |  |
| 3 LOCAT  | 4 DEPTH  | de:             |  | (decimal degrees)      |                                       |   |  |  |               |   |  |
| 1  | ON BOX:  |                 |  | Encountered: 1)        |                                       |   |  |  |               |   |  |
| 2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:  |  |                 |  |                        |                                       |   |  |  |               |   |  |
|  | below land surface, measured on (mo-d  |                 |  |                        |                                       |   | -yr). 4/12/2018 GPS (unit make/model:  |  |               |   |  |
| NW   | - NE   | ☐ above l       | ☐ above land surface, measured on (mo-day- |                        |                                       | -yr)  |  | (WAAS enabled? [                                 |               | Yes No)                                 |  |
| Pump test data: Well wa  |  |                 |  | vater was              | f                                     | it.   |  | ☐ Land Survey ☐ Topographic Map                  |               |   |  |
| W E after hours pumping Well water was .   |  |                 |  |                        |                                       |   |  |  |               |   |  |
| after hours pumping  |  |                 |  |                        |                                       | . gpm   |  |  |               |   |  |
| Estimated Yield:   |  |                 | Yield:                                     | gpm<br>10.5 in to 55 e |                                       |   | 6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map |  |               |   |  |
| 1  | S<br>mile  | Bore Hole       | ore Hole Diameter: 10.5 in. to 55 in. to   |                        |                                       | It. and   | -  |  |               |   |  |
| 7 WELL WATER TO BE USED AS:  |  |                 |  |                        |                                       |   |  |  |               |   |  |
| 1. Domestic  | :  | 5. □            | ] Public Wa                                | nter Supply: well      |                                       |   |  | Field Water Supply:                              | lease         |   |  |
| . —  | Household 6. Dewatering: how many wells?   |                 |  |                        |                                       |   |  |  |               |   |  |
| : =  | ■ Lawn & Garden 7. ☐ Aquifer Recharge: well ID  □ Livestock 8. ☐ Monitoring: well ID |                 |  |                        |                                       |   |  |  |               |   |  |
| . —  | 2.  Irrigation 9. Environmental Remediation: well I                                  |                 |  |                        |                                       |   | a) Closed Loop   |  |               |   |  |
| 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor   |  |                 |  |                        |                                       | Extraction  | b) Ope   | b) Open Loop ☐ Surface Discharge ☐ Inj. of Water |               |   |  |
| 4. Industrial Recovery Injection 13. Other (specify):  |  |                 |  |                        |                                       |   |  |  |               |   |  |
| Was a chemical/bacteriological sample submitted to KDHE?  \Box Yes \Box No If yes, date sample was submitted: \Box No If yes, |  |                 |  |                        |                                       |   |  |  |               |   |  |
| Water well disinfected? Yes No   |  |                 |  |                        |                                       |   |  |  |               |   |  |
| 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other   |  |                 |  |                        |                                       |   |  |  |               |   |  |
| Casing height above land surface   |  |                 |  |                        |                                       |   |  |  |               |   |  |
| 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 .35 ft. to .55 ft., From ft. to ft. ft. ft.  |  |                 |  |                        |                                       |   |  |  |               |   |  |
| GRAVEL PACK INTERVALS: From  |  |                 |  |                        |                                       |   |  |  |               |   |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From   |  |                 |  |                        |                                       |   |  |  |               |   |  |
| Nearest source of possible contamination:  |  |                 |  |                        |                                       |   |  |  |               |   |  |
| ☐ Septic   |  |                 | Lateral Line                               |                        |                                       |   | Livestock Pen  |  | icide Storage |   |  |
| ☐ Sewer  | Lines<br>tight Sewer Lin   | _               | Cess Pool                                  | ☐ Sewa                 |                                       |   | Fuel Storage   |  | loned Water   | Well                                    |  |
| Other (Specify)  |  |                 |  |                        |                                       |   |  |  |               |   |  |
| Direction fro  | om well? SO  | UTH             |  | Distance fi            | rom w                                 | ell?7.5   |  | fi   | •             |   |  |
| 10 FROM  | TO   |                 | LITHOLOG                                   | GIC LOG                |                                       | FROM  | TO I   | LITHO. LOG (cont.) o                             | r PLUGGIN     | G INTERVALS                             |  |
| 1  |  | OP SOIL<br>CLAY |  |                        |                                       |   |  |  |               | *************************************** |  |
| 16   |  | INE SAND        |  |                        |                                       | +   |  | · · · · · · · · · · · · · · · · · · ·            |               |   |  |
| 20   |  | MED GRAV        |  |                        |                                       |   |  |  |               |   |  |
| 46   |  | CLAY            |  |                        | · · · · · · · · · · · · · · · · · · · |   |  |  |               |   |  |
|  |  |                 |  |                        |                                       |   |  | - <del> </del>                                   |               |   |  |
|  | Notes:   |                 |  |                        |                                       |   |  |  |               |   |  |
|  | WELL ONLY  |                 |  |                        |                                       |   |  |  |               |   |  |
| 11 CONTRACTORS OF LANDOWNEDS CERTIFICATION TO 11 TO 12 |  |                 |  |                        |                                       |   |  |  |               |   |  |
| 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) .4/12/2018 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 (mo-day-year) 5/10/2018 under the business name of WENINGER DRILLING, LLC   |  |                 |  |                        |                                       |   |  |  |               |   |  |
| under the b  | usiness name   | of WENIN        | IGER.DR                                    | ILLING, LLC            | to V                                  | S   | ignature .   | SHA-KEZYKPOWSKA:                                 | loter CWTC    |   |  |
| 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  |  |                 |  |                        |                                       |   |  |  |               |   |  |