WATER WELL R		WWC-5		sion of Water			
Original Record		ge in Well Use		irces App. No.		Well ID	
1 LOCATION OF WA		Fraction SE ¼ NE ¼ SE ¼		ion Number 1	Township Number	r Range Number R 2 □ E ■ W	
2 WELL OWNER: Last Name GIRRENS First ALEN Street or Rural Address where well is located						if unknown, distance and	
Business Address: 2701 SOUTH 119TH STREET WEST  direction from nearest town or intersection): If at owner's address, check here:							
Address. City: WICHITA State: KS ZIP 67215							
3 LOCATE WELL	4 DEDTH OF COM		60 ft	5 Latitud		(Ascimal dagress)	
WITH "X" IN	4 DEPTH OF COMPLETED WELL:			5 Latitude:(decimal degrees) Longitude:(decimal degrees)			
SECTION BOX:	2) ft.	3) ft., or 4)	Dry Well	Horizont	Horizontal Datum: □ WGS 84 □ NAD 83 □ NAD 27		
N	WELL'S STATIC WA	3) ft., or 4) □ ATER LEVEL:	ft.		Source for Latitude/Longitude:		
		e, measured on (mo-day-y				)	
NW NE		e. measured on (mo-day-y		}	(WAAS enabled? ☐ Y		
		water was ft.		Land Survey Topographic Map Online Mapper:			
W E		water was ft		☐ Uniii	Onnie wapper		
SW SE	after hou	gpm					
	Estimated Yield:20gpm Bore Hole Diameter: .12.25. in. to60 ft. and				6 Elevation:ti. Ground Level TOC		
S					Source:		
The state of the s							
7 WELL WATER TO		otor Cumples well ITS		10 🗆 🖂 🖂	ield Water Supelin Lee	60	
I. Domestic:     ☐ Household	5. ☐ Public W	ater Supply: well ID ng: how many wells?		10.  Oil Field Water Supply: lease			
Lawn & Garden		Recharge: well ID		☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock	8. Monitori			12. Geothermal: how many bores?			
2. Irrigation	<ol><li>Environmen</li></ol>			a) Closed Loop			
3. Feedlot	☐ Air Sparg		xtraction			charge	
4 🗌 Industrial 🔲 Recovery 🔲 Injection 13. 🗋 Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:							
Water well disinfected? ■ Yes □ No  8 TYPE OF CASING USED: □ Steel ■ PVC □ Other							
Cosing diagnoter 5 in to 60 ft Diagnoter in to ft Diagnoter in to ft							
Casing diameter 5 in to 60 ft. Diameter in to ft. Diameter in to ft. Diameter in to SDR-26 ft. Casing height above land surface 17 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)							
SCREEN-PERFORATED INTERVALS: From .49ft. to .60							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other							
Grout Intervals: From							
Nearest source of possible contamination:         □ Septic Tank       □ Lateral Lines       □ Pit Privy       □ Livestock Pens       □ Insecticide Storage							
□ Septic Tank       □ Lateral Lines       □ Pit Privy       □ Livestock Pens       □ Insecticide Storage         □ Sewer Lines       □ Cess Pool       □ Sewage Lagoon       □ Fuel Storage       □ Abandoned Water Well							
■ Watertight Sewer Lines							
☐ Other (Specify) Direction from well? SOUTH Distance from well? 30 ft.							
Direction from well? SO	YIH.	Distance from we	11? .30		THO LOGY	N 17/1/23 17/1 IN 1997 PAT / A 1/2	
10 FROM TO	LITHOLO	GIC LOG	FROM	TO LI	THO, LOG (cont.) or I	PLUGGING INTERVALS	
	TOP SOIL CLAY		-				
	INE SAND	W-10-10-10-10-10-10-10-10-10-10-10-10-10-	<del>  -</del>				
	MED GRAVEL						
	Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed. reconstructed, or plugged							
under my inrisdiction or	OK LAINDOWNER  id was completed on f	mo-day-vear) 12/3/20	18 and t	his record is t	rue to the best of my	knowledge and belief.	
under my jurisdiction and was completed on (mo-day-year) .12/3/2018 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 884							
under the business name	of WENINGER DE	RILLING, LLC	Sig	nature	and Kung	zu Kr	
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.							
			Vater Well Own KSA 82a-121		tor your records. Telepho	Revised 7/10/2015	
Visit us at http://www.kdbeks	.gov/waterwell/index.ntml		NO/1 020-12			110713CU //10/2010	