

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

Well ID

## 1 LOCATION OF WATER WELL:

County: SEDGWICK

Fraction  
NW 1/4 SE 1/4 NE 1/4 SE 1/4

Section Number  
30

Township Number  
T 27 S

Range Number  
R 3 ☐ E ☒ W

## 2 WELL OWNER: Last Name: LETT

First: MARK

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☒

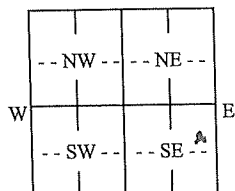
Business:

Address: 1501 N SEDGWICK ST

Address:

City: GARDEN PLAIN State: KS ZIP: 67050

## 3 LOCATE WELL WITH "X" IN SECTION BOX:



1 mile

## 4 DEPTH OF COMPLETED WELL: 86' ft.

Depth(s) Groundwater Encountered: 1) ..... ft.

2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: 24' ft.

☒ below land surface, measured on (mo-day-yr) 9-12-24

☐ above land surface, measured on (mo-day-yr) .....

Pump test data: Well water was ..... ft.

after ..... hours pumping ..... gpm

Well water was ..... ft.

after ..... hours pumping ..... gpm

Estimated Yield: ..... gpm

Bore Hole Diameter: 12 in. to 86 ft. and

..... in. to ..... ft.

5 Latitude: 37.66851 (decimal degrees)

Longitude: -97.68187 (decimal degrees)

Horizontal Datum: ☒ WGS 84 ☐ NAD 83 ☐ NAD 27

Source for Latitude/Longitude:

☒ GPS (unit make/model: I-PHONE

(WAAS enabled? ☐ Yes ☐ No)

☐ Land Survey ☐ Topographic Map

☐ Online Mapper: .....

6 Elevation: ..... ft. ☐ Ground Level ☐ TOC

Source: ☐ Land Survey ☒ GPS ☐ Topographic Map

☐ Other .....

## 7 WELL WATER TO BE USED AS:

1. Domestic:

☐ Household

☒ Lawn & Garden

☐ Livestock

2. ☐ Irrigation

3. ☐ Feedlot

4. ☐ Industrial

5. ☐ Public Water Supply: well ID .....

6. ☐ Dewatering: how many wells? .....

7. ☐ Aquifer Recharge: well ID .....

8. ☐ Monitoring: well ID .....

9. Environmental Remediation: well ID .....

☐ Air Sparge ☐ Soil Vapor Extraction

☐ Recovery ☐ Injection

10. ☐ Oil Field Water Supply: lease .....

11. Test Hole: well ID .....

☐ Cased ☐ Uncased ☐ Geotechnical

12. Geothermal: how many bores? .....

a) Closed Loop ☐ Horizontal ☐ Vertical

b) Open Loop ☐ Surface Discharge ☐ Inj. of Water

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 ..... CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded

Casing diameter 5 in. to 86 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface 12 in. Weight 2.35 lbs./ft. Wall thickness or gauge No. SDR26

TYPE OF SCREEN OR PERFORATION MATERIAL:

☐ Steel ☐ Stainless Steel ☐ Fiberglass ☒ PVC

☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)

☐ Other (Specify) .....

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 40 ft. to 86 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 24 ft. to 86 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....

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

Nearest source of possible contamination:

☐ Septic Tank

☐ Lateral Lines

☐ Pit Privy

☐ Livestock Pens

☐ Insecticide 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) .....

Direction from well? SOUTH Distance from well? 30 ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	TOP SOIL			
3	12	CLAY			
12	24	SUGAR SAND			
24	38	CLAY			
38	46	MEDIUM SAND			
46	86	RED SHALE			

Notes:

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) 9-12-24 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 ..... This Water Well Record was completed on (mo-day-year) 9-13-24 ..... under the business name of HARP WELL AND PUMP SERVICE INC. Signature: TODD S. HARP

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

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