

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

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|--|-----------------------------------|---|---|--------------------------|
| 1 LOCATION OF WATER WELL: County: Sedgwick | Fraction SE ¼ SE ¼ NE ¼ | Section Number 29 | Township Number T 25 S R 1 | Range Number 1 |
| Distance and direction from nearest town or city street address of well if located within city? 9025 N Broadway | | Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____ | | |
| 2 WATER WELL OWNER: Andy Miller RR#, St. Address, Box # : 9025 N Broadway City, State, ZIP Code : Valley Center, KS 67147 | | | | |

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| 3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: | 4 DEPTH OF COMPLETED WELL 90 ft. |
| | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 12 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No x ; If yes, mo/day/yrs Sample was submitted _____ Water Well Disinfected? Yes x No _____ |

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| 5 TYPE OF CASING USED: | 5 Wrought Iron | 8 Concrete tile | CASING JOINTS: Glued x Clamped _____ |
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | 9 Other (specify below) _____ |
| 2 PVC | 4 ABS | 7 Fiberglass | _____ Welded _____ |
| Blank casing diameter 5 in. to 20 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. | Casing height above land surface 12 in., Weight 2.40 lbs./ft. | Wall thickness or gauge No. 160psi | _____ Threaded _____ |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | |
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 7 PVC |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 8 RM (SR) |
| 9 ABS | 11 Other (specify) _____ | 12 None used (open hole) | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | |
| 1 Continuous slot | 3 Mill slot | 5 Guaze wrapped | 7 Torch cut |
| 2 Louvered shutter | 4 Key punched | 6 Wire wrapped | 8 Saw Cut |
| 9 Drilled holes | 11 None (open hole) | | |
| 10 Other (specify) _____ | | | |
| SCREEN-PERFORATED INTERVALS: | | | |
| From 20 ft. to 90 ft. | From _____ ft. to _____ ft. | From _____ ft. to _____ ft. | From _____ ft. to _____ ft. |
| GRAVEL PACK INTERVALS: | | | |
| From 20 ft. to 90 ft. | From _____ ft. to _____ ft. | From _____ ft. to _____ ft. | From _____ ft. to _____ ft. |

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|--|---|---------------------------------------|-----------------------|-------------------------|
| 6 GROUT MATERIAL: | 1 Neat cement | 2 Cement grout | 3 Bentonite | 4 Other _____ |
| Grout Intervals From 3 ft. to 20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. | What is the nearest source of possible contamination: | | | |
| 1 Septic tank | 4 Lateral lines | 7 Pit privy | 10 Livestock pens | 13 Insecticide Storage |
| 2 Sewer lines | 5 Cess pool | 8 Sewage lagoon | 11 Fuel storage | 14 Abandoned water well |
| 3 Watertight sewer lines | 6 Seepage pit | 9 Feedyard | 12 Fertilizer storage | 15 Oil well/ gas well |
| Direction from well? West | How many feet? 400ft | 16 Other (specify below) Creek | | |

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|----------------|------|----|--------------------|
| 0 | 1 | Top Soil | | | |
| 1 | 15 | Clay | | | |
| 15 | 20 | Fine Sand | | | |
| 20 | 28 | Clay | | | |
| 28 | 90 | Shale | | | |
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **4-24-2007** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **740**. This Water Well Record was completed on (mo/day/year) **4-25-2007** under the business name of **Weninger Drilling Inc.** by (signature) *Kelsey Williams*

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell>.