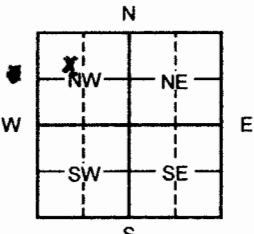


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Sedgwick		Fraction se ¼ nw ¼ nw ¼		Section Number 32	Township Number T 25s S	Range Number R 1e E/W
Distance and direction from nearest town or city street address of well if located within city? 303 N Trail Creek Ct				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Branden Patry RR#, St. Address, Box # : 303 N Trail Creek Ct City, State, ZIP Code : Valley Center, Ks 67147		4 DEPTH OF COMPLETED WELL 123 ft.		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.		
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: 		WELL'S STATIC WATER LEVEL 24 ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 3 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/yr Sample was submitted _____				Water Well Disinfected? Yes x No _____		
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 2 PVC 4 ABS 7 Fiberglass		5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued x Clamped Welded _____ Threaded _____		Blank casing diameter _____ in. to 43 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		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)		SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____		SCREEN-PERFORATED INTERVALS: From 43 ft. to 123 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 24 ft. to 123 ft. From _____ ft. to _____ ft.		
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other		Grout Intervals From 3 ft. to 24 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 16 Other (specify below) 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? 35ft		
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	1	Top Soil				
1	12	Clay				
12	15	Fine sand				
15	75	Shale				
75	90	Gypsum rock				
90	95	Shale				
95	123	Gypsum rock				
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) 5-11-07 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) 5-10-07 under the business name of Weninger Drilling Inc. by (signature) _____						
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 .						