

P-53-25d

## WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		SW 1/4 SW 1/4 SE 1/4	17	T 26 S	R 1 E
Distance and direction from nearest town or city street address of well if located within city?					
x 1900 feet west of Broadway on the north side of N. 53rd Street, Wichita, KS					
2 WATER WELL OWNER: EPA Region #7					
RR#, St. Address, Box #: 901 N. 5th Street					
City, State, ZIP Code: Kansas City, KS 66101					
Board of Agriculture, Division of Water Resources					
Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 42.4 ft. ELEVATION:			
		Depth(s) Groundwater Encountered: 11.1 ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL: 11.1 ft. below land surface measured on mo/day/yr 7/26/01			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter: 8.5 in. to 43 in. to _____ in. to _____ in.			
		WELL WATER TO BE USED AS:			
		5 Public water supply 8 Air conditioning 11 Injection well			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Piezometer P-53-25d			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes _____ No <u>X</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____					
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____					
7 Fiberglass _____ Threaded <u>Flush</u>					
Blank casing diameter: 2 in. to 32 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.					
Casing height above land surface: Flush in., weight 0.703 lbs./ft. Wall thickness or gauge No. Sch 40					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement					
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____					
12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)					
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes					
7 Torch cut 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From 32 ft. to 42.4 ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 31 ft. to 42.4 ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From 3 ft. to 9 ft., From 28 ft. to 31 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 14 Abandoned water well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)					
13 Insecticide storage Midland Refinery					
Direction from well? Northeast How many feet? 1300					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6	Sandy Clay-brown, Fine to medium Sand			
6	8	Silty Sand-brown, V. Fine to Fine grained			
8	13.5	Sand-tan, med. to coarse grained			
13.5	26.5	Sand-med. to Very coarse grained			
26.5	38	Sand-tan, coarse to very coarse			
38	43	Sand-fine to very coarse			
43		Bedrock-weathered Shale			
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) 8/30/01 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 9/18/01					
under the business name of Grock Technical Services, Inc. by (signature) [Signature]					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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