WATER WELL RECORD Form WWC-5				Division of Water  Resources App. No.   Well ID				
✓ Original Record ☐ Correction ☐ Chan  1 LOCATION OF WATER WELL:			e in Well Use	Resources App. No. Section Number		Township Number		
			Fraction	4SW 4 22 T 36 26 S 80 R 2 E W				
County, Seagures.								
2 WELLOWNER: Last Name: First: 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:								
Address: 7724 E. 37th St. N.								
Address:				8677 F 3	2nd St M	. Wichita, Kans	sas 67226	
	<u> Iichita</u>	State: Kans	as ZIP: <b>67226</b>	0077 H. 37	Thu Be. II			
3 LOCATE		4 DEPTH OF COM	IPLETED WELL:	120 ft.	5 Latitude	37.74212	(decimal degrees)	
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)							
SECTION		2) ft.	3) ft., or 4)	Dry Well	Horizont	al Datum: 🗷 WGS 84	$\square$ NAD 83 $\square$ NAD 27	
11		WELL'S STATIC WAT	TER LEVEL: 32	ft. Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-				GPS (unit make/model: iPhone )			
NW	above land surface, measured on (mo-day-							
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:			
W	Well water was							
SW	SE	1	s pumping					
		Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC			
S					Source: ☐ Land Survey ■ GPS ☐ Topographic Map			
mile  in. to ft.								
7 WELL WATER TO BE USED AS:								
1. Domestic:								
	Household       6. □ Dewatering: how many wells?         Lawn & Garden       7. □ Aquifer Recharge: well ID					Cased Uncased Geotechnical		
	★ Lawn & Garden       7. ☐ Aquifer Recharge: well ID       ☐ Cased ☐ Uncased ☐ Geotechnical         ☐ Livestock       8. ☐ Monitoring: well ID       12. Geothermal: how many bores?							
2. Irrigation			tal Remediation: well		a) Clos	ed Loop   Horizontal	☐ Vertical	
3. Feedlot						b) Open Loop  Surface Discharge Inj. of Water		
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								
Casing diameter 5								
Casing height above land surface								
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)								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped 🗷 Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From 40 ft. to 120 ft. From ft. from ft. from ft. From ft. from ft.								
GRAVEL PACK INTERVALS: From 24 ft. to 120 ft., From ft. to ft., From ft. ft.								
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         ☐ Sewer Lines       ☐ Cess Pool       ☐ Sewage Lagoon       ☐ Fuel Storage       ☐ Abandoned Water Well								
☐ 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? 50.ftplus ft.								
10 FROM	ТО		OGIC LOG	FROM	TO I	JTHO. LOG (cont.) or	PLUGGING INTERVALS	
0		topsoil						
3		clay						
28		brown shale						
42		gray shale			-			
108	120	limestone						
	Notes:							
YA B CURYALIES								
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) 95/22/2923 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No236 This Water Well Record was completed on (mo-day-year) 5/25/2023 under the business name of								
under the b	ousiness nar	ne ofHarp.V	Vell and Pump Ser	viceSi	gnature .Tod	d S.Harp		
Mail I v	white copy alor	g with a fee of \$5.00 for eac	h constructed well to: Ka	ansas Department c	of Health and Env	vironment, Bureau of Wate	r, 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 Revised 7/10/2015								