

## WATER WELL RECORD      Form WWC-5      KSA 82a-1212      ID No.

<b>1 LOCATION OF WATER WELL:</b> County: <u>Sedgwick</u>		<b>Fraction</b> <u>SE ¼ SE ¼ NW ¼</u>		<b>Section Number</b> <u>24</u>		<b>Township Number</b> <u>T 27 S</u>		<b>Range Number</b> <u>R 1 E</u>			
Distance and direction from nearest town or city street address of well if located within city? <u>5530 E. Central; Wichita, Ks.</u>											
<b>2 WATER WELL OWNER:</b> <u>LBT Partnership</u>											
RR#, St. Address, Box # : <u>605 West 47th St.</u>						Board of Agriculture, Division of Water Resources					
City, State, ZIP Code : <u>K.C. Mo. 64112</u>						Application Number:					
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL</b> <u>15'</u> ft. <b>ELEVATION:</b> _____ ft.									
		Depth(s) Groundwater Encountered <u>1 10'</u> ft. 2 _____ ft. 3 _____ ft.									
		WELL'S STATIC WATER LEVEL <u>13.10</u> ft. below land surface measured on mo/day/yr <u>4/15/04</u>									
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm									
		WELL WATER TO BE USED AS: 1 Domestic    3 Feedlot    5 Public water supply    8 Air conditioning    11 Injection well 2 Irrigation    4 Industrial    6 Oil field water supply    9 Dewatering    12 Other (Specify below) 7 Domestic (lawn & garden) <u>10 Monitoring well</u>									
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>(No)</u>											
<b>5 TYPE OF BLANK CASING USED:</b>											
1 Steel    3 RMP (SR)    5 Wrought iron    8 Concrete tile    CASING JOINTS: Glued _____ Clamped _____ <u>2 PVC</u> 4 ABS    6 Asbestos-Cement    9 Other (specify below)    Welded _____ 7 Fiberglass    Threaded <u>X</u> Blank casing diameter <u>2.375</u> in. to <u>5'</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>Flush Mt.</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>											
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>											
1 Steel    3 Stainless Steel    5 Fiberglass    7 PVC    10 Asbestos-Cement 2 Brass    4 Galvanized Steel    6 Concrete tile    8 RMP (SR)    11 Other (Specify) _____ 9 ABS    12 None used (open hole)											
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>											
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) _____ ft.											
<b>SCREEN-PERFORATED INTERVALS:</b> From <u>15'</u> ft. to <u>5'</u> ft., From _____ ft. to _____ ft.											
<b>GRAVEL PACK INTERVALS:</b> From <u>15'</u> ft. to <u>4'</u> ft., From _____ ft. to _____ ft.											
<b>6 GROUT MATERIAL:</b>											
1 Neat cement    2 Cement grout    3 Bentonite    4 Other <u>concrete</u> Grout Intervals: From <u>4'</u> ft. to <u>2'</u> ft., From <u>2'</u> ft. to <u>8'</u> ft., From _____ ft. to _____ ft.											
<b>What is the nearest source of possible contamination:</b>											
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 <u>Former</u> 15 Oil well/Gas well 3 Watertight sewer lines    6 Seepage pit    9 Feedyard    12 Fertilizer storage    16 Other (specify below) _____ 13 Insecticide storage _____											
Direction from well? <u>East South East</u> How many feet? <u>60'</u>											
<b>FROM</b>		<b>TO</b>		<b>LITHOLOGIC LOG</b>		<b>FROM</b>		<b>TO</b>		<b>PLUGGING INTERVALS</b>	
0		15.0		Asphalt							
15.0		5.0		DK Bn to Black mottled clay, moist, firm							
5.00		9.50		lt Bn clay w/caliche stringers & nodules							
				Moist, firm							
9.50		12.00		lt Pale Bn sandy clay, moist, w/trace amt							
				of caliche							
12.0		15.0		yellow Bn - yellow three way there							
				shale to shale, dry, tight							
F.M. OK'd by Don Taylor											
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) <u>constructed</u> (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4-8-04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>732</u> . This Water Well Record was completed on (mo/day/yr) <u>4-15-04</u> under the business name of <u>J.B. Services</u> by (signature) <u>James Becker</u>											
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, 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.											