

WATER WELL RECORD NW NE SW SE Form WWC-5

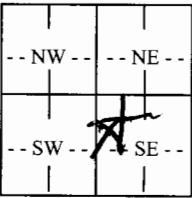
Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Saline Fraction: 3/4 NW 1/4 9E 1/4 Section Number 7 Township Number T 27 S Range Number R 10 E

Distance and direction from nearest town or city street address of well if located within city? 1531 Woodrow Ct

2 WATER WELL OWNER: Mrs Harkness
RR#, St. Address, Box # : 1531 Woodrow Ct
City, State, ZIP Code : Wichita, KS 67203

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: _____
Longitude: _____
Elevation: 1300
Datum: _____
Data Collection Method: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:
N
W E
S


4 DEPTH OF COMPLETED WELL 43 ft.
Depth(s) Groundwater Encountered (1) 23 ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL 23 ft. below land surface measured on mo/day/yr. 6-2-06
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: 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 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 _____ No X

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) Welded _____
2 PVC 4 ABS 7 Fiberglass Threaded _____
Blank casing diameter 5 in. to 33 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface 12 in., Weight _____ lbs./ft. Wall thickness or gauge No. 160
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 Guazed 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 33 ft. to 43 ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
none

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
Grout Intervals: From 0 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 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? East How many feet? 60

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS
0 13 Top Soil _____
13 27 Fine Tan Sand _____
27 43 Coarse Tan Sand _____

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) 6-2-06 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 472 This Water Well Record was completed on (mo/day/year) 6-22-06
under the business name of Beardon Pump & Well by (signature) David Beardon

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. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.