

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 17	Township Number T 27s S	Range Number R 1e E/W
Distance and direction from nearest town or city street address of well if located within city? 1100 w 11th st n				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: City Of Wichita RR#, St. Address, Box # : 455 N Main City, State, ZIP Code : Wichita, Ks 67235						
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>		4 DEPTH OF COMPLETED WELL 34 ft. Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 14 ft. below land surface measured on mo/day/yr _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 80 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)		5 Wrought Iron		8 Concrete tile
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
7 Fiberglass						CASING JOINTS: Glued x Clamped _____
						Welded _____
						Threaded _____
Blank casing diameter 8 in. to 24 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface 12 in., Weight 5.76 lbs./ft. Wall thickness or gauge No. 160psi						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)
9 ABS		11 Other (specify)		12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot		3 Mill slot		5 Guaze wrapped		7 Torch cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut
9 Drilled holes		11 None (open hole)				
10 Other (specify)						
SCREEN-PERFORATED INTERVALS: From 24 ft. to 34 ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From 24 ft. to 34 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide Storage
						14 Abandoned water well
						15 Oil well/ gas well
						16 Other (specify below) river
Direction from well? west				How many feet? 60		
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	3	Top soil				
3	10	Clay				
10	18	Fine sand				
18	34	Med 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) 5-26-07 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) 6-15-07 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 .						