

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction <u>NW ¼ NW ¼ SW ¼</u>		Section Number <u>33</u>	Township Number <u>T 27 S</u>	Range Number <u>R 01 (E)</u>						
County: <u>Sedgwick</u>				Global Positioning System (decimal degrees, min. of 4 digits)								
Distance and direction from nearest town or city street address of well if located within city? <u>9519 West Central Avenue, Wichita, KS</u>				Latitude: _____								
				Longitude: _____								
2 WATER WELL OWNER: <u>Atlantic Richfield Co. - Lauren Walker</u>				Elevation: _____								
RR#, St. Address, Box # : <u>501 Westlake Park Blvd. Ste.20.209C</u>				Datum: _____								
City, State, ZIP Code : <u>Houston, TX 77079</u>				Data Collection Method: _____								
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>30'</u> ft.										
<div style="text-align: center;"> N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 2px;">NW</td> <td style="padding: 2px;">NE</td> </tr> <tr> <td style="text-align: center; padding: 2px;">X</td> <td style="padding: 2px;">SE</td> </tr> <tr> <td style="padding: 2px;">SW</td> <td style="padding: 2px;">SE</td> </tr> </table> S </div>		NW	NE	X	SE	SW	SE	Depth(s) Groundwater Encountered 1 <u>~20'</u> ft. 2 _____ ft. 3 _____ ft.				
		NW	NE									
		X	SE									
		SW	SE									
		WELL'S STATIC WATER LEVEL <u>N/A</u> ft. below land surface measured on mo/day/yr <u>N/A</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: 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 <u>Air Sparge</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>X</u>										
5 TYPE OF CASING USED:												
1 Steel		3 RMP (SR)		5 Wrought Iron		8 Concrete tile						
(2 PVC)		4 ABS		6 Asbestos-Cement		CASING JOINTS: Glued _____ Clamped _____						
		7 Fiberglass		9 Other (specify below)		Welded _____						
						Threaded <u>X</u>						
Blank casing diameter <u>2</u> in. to <u>27.5</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.												
Casing height Below land surface <u>7.32</u> in., Weight _____ lbs./ft. Wall thickness or gauge No. <u>Sc. 40 PVC</u>												
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						
						10 Asbestos-Cement						
						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 <u>27.5</u> ft. to <u>30</u> ft. From _____ ft. to _____ ft.												
From _____ ft. to _____ ft. From _____ ft. to _____ ft.												
GRAVEL PACK INTERVALS: From <u>24</u> ft. to <u>30</u> ft. From _____ ft. to _____ ft.												
From _____ ft. to _____ ft. From _____ ft. to _____ ft.												
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3 Bentonite) 4 Other _____												
Grout Intervals From <u>1</u> ft. to <u>24</u> 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) _____						
Direction from well? _____ How many feet? _____												
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS							
0	0.5	Concrete										
0.5	10	Silty clay										
10	15	Sandy, silty clay										
15	20	Gravelly, fine sand, clayey										
20	25	Gravelly, clayey sand				AS 2						
25	30	Gravelly 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) <u>10/09/2007</u> and this record is true to the best of my knowledge and belief.												
Kansas Water Well Contractor's License No. <u>594</u> . This Water Well Record was completed on (mo/day/year) <u>3/11/2008</u>												
under the business name of <u>Coranco Great Plans, Inc.</u> by (signature) <u>Brian Feltner</u>												
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 .												

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