

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

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	SE ¼ SE ¼ SE ¼	20	T 27 S	R 1 E

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

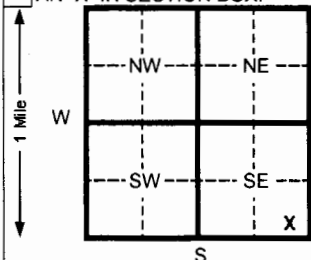
565 S. Market - Wichita2 WATER WELL OWNER: **T&B Corporation**RR#, St. Address, Box # : **1955 S. Washington**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code : **Wichita, KS 67211**

Application Number:

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



4 DEPTH OF COMPLETED WELL

32.5 ft. ELEVATION: **1297.62 (TOC)**Depth(s) Groundwater Encountered 1 **14.8** ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter **8.25** in. to **32.5** ft. and _____ in. to _____ ft.

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 Lawn and garden (domestic) 10 Monitoring well **Air Sparge**Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:

1 Steel 3 RMP (SR)

2 PVC 4 ABS

5 Wrought Iron 8 Concrete tile

6 Asbestos-Cement 9 Other (specify below)

7 Fiberglass

CASING JOINTS: Glued _____ Clamped _____

Welded _____

Threaded FlushBlank casing diameter **2** in. to **30** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.Casing height above land surface **Flushmount** in., weight **0.703** lbs./ft. Wall thickness or gauge No. **SCH. 40**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel 3 Stainless steel

2 Brass 4 Galvanized steel

5 Fiberglass

6 Concrete tile

7 PVC 10 Asbestos-cement

8 RMP (SR)

9 ABS

11 Other (specify)

12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot

2 Louvered shutter

3 Mill slot

4 Key punched

5 Gauzed wrapped

6 Wire wrapped

7 Torch cut

8 Saw cut

9 Drilled holes

10 Other (specify)

11 None (open hole)

SCREEN-PERFORATED INTERVALS: From **30** ft. to **32.5** ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **15** ft. to **32.5** 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

Portland GroutGrout intervals From **15** ft. to **13** ft. From **13** ft. to **3** ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank

2 Sewer lines

3 Watertight sewer lines

4 Lateral lines

5 Cess pool

6 Seepage pit

7 Pit privy

8 Sewage lagoon

9 Feedyard

10 Livestock pens

11 Fuel storage

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	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.3		Concrete			
0.3	3.5		Fill, Clay, dark gray			
3.5	8		Clay, gray, iron staining			
8	13		Sandy Silt, with some clay, very fine to fine grained sand			
13	32.5		Sand, yellow, medium to coarse grained			
			Well Completion Note:			
			0' to 1' - Concrete			
			1' to 3' - Sand, for remediation system pipe trench			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1) constructed**, (2) reconstructed, or (3) plugged under my jurisdiction and wascompleted on (mo/day/yr) **09/19/08**

and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. **531**This Water Well Record was completed on (mo/day/yr) **10/15/08**under the business name of **Geotechnical Services Inc.**by (signature) *[Signature]*

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.