

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		NE $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$	21	T 27 S	R 1 E
Distance and direction from nearest town or city street address of well if located within city? 250 N. St. Francis					
2 WATER WELL OWNER: The Coleman Company, Inc.					
RR#, St. Address, Box # : 3600 N. Hydraulic			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Wichita, KS 67219			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 37 ft. ELEVATION: 1299.47 (TOC)			
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL 17.21 ft. below TOC measured on mo/day/yr 03/02/12			
		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 37 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			
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 BLANK CASING USED:					
1 Steel		3 RMP (SR)		CASING JOINTS: Glued _____ Clamped _____	
2 PVC		4 ABS		Welded _____	
		7 Fiberglass		Threaded Flush	
Blank casing diameter 2 in. to 27 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 0 in., weight 0.703 lbs./ft. Wall thickness or gauge No. SCH. 40					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				8 RMP (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 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From 27 ft. to 37 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 25 ft. to 37 ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals From 1 ft. to 25 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		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
0	0.5		Concrete		
0.5	10		Fill, clay with brick & concrete pieces and sand, concrete layer around 7.5'		
10	15		Sand, coarse grained, well to mixed sorted, clay layer at 12'		
15	17.5		Fat Clay, with thin sand lenses		
17.5	20		Sand, coarse grained, poorly sorted		
			Sand, medium to coarse grained, well to mixed sorted, with some gravel below 22.5'		
20	31.5		Shale, olive		
31.5	34		Sand, fine grained, well sorted		
34	36		Shale, olive		
36	37				
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/yr) 03/13/12 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) 03/26/12		
under the business name of Geotechnical Services Inc.			by (signature) <i>[Signature]</i>		
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.					

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