

Corrected

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 ¼ NW ¼ NW ¼		3		T 27 S		R 1 E																																																																														
Distance and direction from nearest town or city street address of well if located within city? Along Hydraulic St. between I-135 and Grove St. - Wichita																																																																																						
2 WATER WELL OWNER: UPRR																																																																																						
RR#, St. Address, Box # : 1400 Douglas St., Stop 1030 Board of Agriculture, Division of Water Resources																																																																																						
City, State, ZIP Code : Omaha, NE 68179-1030 Application Number:																																																																																						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 26.5 ft. ELEVATION: 1323 (estimated)																																																																																				
		Depth(s) Groundwater Encountered 1 _____ 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 in. to 28 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) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____																																																																																						
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____																																																																																						
7 Fiberglass _____ Threaded _____ Flush _____																																																																																						
Blank casing diameter 2 in. to 21.5 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 8 RMP (SR) 11 Other (specify) _____																																																																																						
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)																																																																																						
SCREEN OR PERFORATION OPENINGS ARE:																																																																																						
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)																																																																																						
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify) _____																																																																																						
7 Torch cut																																																																																						
SCREEN-PERFORATED INTERVALS: From 21.5 ft. to 26.5 ft. From _____ ft. to _____ ft.																																																																																						
GRAVEL PACK INTERVALS: From 19.5 ft. to 28 ft. From _____ ft. to _____ ft.																																																																																						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																																																																						
Grout Intervals From 2 ft. to 19.5 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 14 Abandoned water well																																																																																						
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well																																																																																						
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)																																																																																						
13 Insecticide storage																																																																																						
Direction from well? _____ How many feet? _____																																																																																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>5</td> <td></td> <td>Lithology not logged</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>15</td> <td></td> <td>Lean Clay, very dark brown to brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>20</td> <td></td> <td>Sandy Clay, brown, with fine to medium sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20</td> <td>25.9</td> <td></td> <td>Fat Clay, dark gray brown to dark gray</td> <td></td> <td></td> <td></td> </tr> <tr> <td>25.9</td> <td>26.5</td> <td></td> <td>Sand, well graded, dark yellow brown, medium to coarse grained</td> <td></td> <td></td> <td></td> </tr> <tr> <td>26.5</td> <td>27</td> <td></td> <td>Lean/Fat Clay, dark gray</td> <td></td> <td></td> <td></td> </tr> <tr> <td>27</td> <td>28</td> <td></td> <td>Lithology not logged</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3"></td> <td colspan="4">GPS:</td> </tr> <tr> <td colspan="3"></td> <td colspan="4">Latitude: N 37.73743889</td> </tr> <tr> <td colspan="3"></td> <td colspan="4">Longitude: W 97.31303889</td> </tr> </tbody> </table>										FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	5		Lithology not logged				5	15		Lean Clay, very dark brown to brown				15	20		Sandy Clay, brown, with fine to medium sand				20	25.9		Fat Clay, dark gray brown to dark gray				25.9	26.5		Sand, well graded, dark yellow brown, medium to coarse grained				26.5	27		Lean/Fat Clay, dark gray				27	28		Lithology not logged							GPS:							Latitude: N 37.73743889							Longitude: W 97.31303889			
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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) 10/22/13 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) 11/13/13, rev. 12/18/13																																																																																						
under the business name of GSI Engineering, LLC 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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