

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number
County: Sedgwick		NW ¼ NE ¼ SW ¼		2	T 27 S	R 2 E/W
Distance and direction from nearest town or city street address of well if located within city? 2517 N. Rosemont Ct				Global Positioning System (decimal degrees, min. of 4 digits)		
2 WATER WELL OWNER: Tom Sanders RR#, St. Address, Box # : 2517 N. Rosemont Ct. City, State, ZIP Code : Wichita, KS 67212				Latitude: _____		
				Longitude: _____		
				Elevation: _____		
				Datum: _____		
				Data Collection Method: _____		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 70 ft.	
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.	
		WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr _____	
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm	
		Est. Yield 25 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:		5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued x Clamped	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded			
2 PVC 4 ABS 7 Fiberglass Threaded			
Blank casing diameter 5 in. to 20 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			
Casing height above land surface 12 in., Weight 2.40 lbs./ft. Wall thickness or gauge No. 160psi			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____			
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot 3 Mill slot 5 Gauge wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)			
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From 20 ft. to 70 ft. From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From 20 ft. to 70 ft. From _____ ft. to _____ ft.			

6 GROUT MATERIAL:		1 Neat cement 2 Cement grout 3 Bentonite 4 Other	
Grout Intervals From 3 ft. to 20 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 13 Insecticide Storage 16 Other (specify below)			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well			
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well			
Direction from well? East		How many feet? 19ft.	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	18	Clay			
18	60	Limestone			
60	70	Gypsum Rock			

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) 4-28-2007 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) 4-14-2007
under the business name of Weninger Drilling Inc.	by (signature) <i>Kelsey Weninger</i>

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>.