

WATER WELL RECORD Form WWC-5 KSA 82a-1212

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|---|---|-----------------------------|----------------------------------|--------------------------------|
| 1 LOCATION OF WATER WELL: Sedgwick | FRACTION NE 1/4 NE 1/4 SW 1/4 | SECTION NUMBER 20 | TOWNSHIP NUMBER T 27 S | RANGE NUMBER R 2E EW |
|---|---|-----------------------------|----------------------------------|--------------------------------|

Distance and direction from nearest town or city street address of well if located within city?
500 ft. plus, North of Douglas & East of McLean 200 plus ft. Wichita, Kansas

2 WATER WELL OWNER: **RIVER VISTA LLC**
 RR#,ST. ADDRESS,BOX #: **150 N. Market** Board of Agriculture, Division of Water Resource
 CITY, STATE: **Wichita, Kansas** ZIP CODE: _____ Application Number: _____

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| <p>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p> <div style="text-align: center;"> </div> | <p>4 DEPTH OF COMPLETED WELL: 45 ft. ELEVATION: _____ ft.</p> <p>Depth of groundwater Encountered: _____ ft.</p> <p>WELL'S STATIC WATER LEVEL 20 FT. BELOW LAND SURFACE MEASURED ON 11/28/17 mo/day/yr.</p> <p>Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm</p> <p>Est. Yield: gpm Well water was _____ ft. after _____ hours of pumping @ _____ gpm</p> <p>Bore Hole Diameter 12 in. to 45 ft. and _____ in. to _____ ft.</p> <p>WELL WATER TO BE USED AS:</p> <p>1. Domestic 3. Feedlot 5. Public water supply 7. Lawn and garden only 9. Dewatering 11. Injection well 2. Irrigation 4. Industrial 6. Oil field water supply 8. Air conditioning 10. Monitoring well 12. Other (Specify below)</p> <p>Was a chemical/bacteriological sample submitted to Department? YES NO; If yes, what mo/day/yr was sample submitted _____</p> <p>Was Water Well Disinfected? YES NO</p> |
|---|--|

5 TYPE OF CASING USED:

| | | | | | |
|---------------|-------------|--------------------|------------------|--------------------------|--------------------------------------|
| 1. Steel | 3. RPM (SR) | 5. Wrought Iron | 7. Fiberglass | 9. Other (Specify below) | CASING JOINTS: Glued Threaded |
| 2. PVC | 4. ABS | 6. Asbestos-Cement | 8. Concrete tile | SDR-26 | Welded Clamped |

Blank casing diameter **5** in. to **25** ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.

Casing height above land surface: **12 in. plus** Weight: **2.35** lbs. / ft. Wall thickness or gauge No. **.214**

TYPE OF SCREEN OR PERFORATION MATERIAL:

| | | | | | |
|----------|--------------------|------------------|---------------|---------------------|---------------------------|
| 1. Steel | 3. Stainless Steel | 5. Fiberglass | 7. PVC | 9. ABS | 11. Other (specify) |
| 2. Brass | 4. Galvanized | 6. Concrete Tile | 8. RMP (SR) | 10. Asbestos-Cement | 12. None used (open hole) |

SCREEN OR PERFORATION OPENINGS ARE:

| | | | | | |
|---------------------|----------------|-------------------|-------------------|---------------------|----------------------|
| 1. Continuous slot | 3. Mill slot | 5. Gauzed 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 - PERFORATION INTERVAL From **25** ft. to **45** ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **24** ft. to **45** ft., From _____ ft. to _____ ft.

6 GROUT MATERIALS: 1. Neat cement 2. Cement Grout 3. Bentonite Other **bentonite hole plug**

Grout Intervals: From **4** ft. to **24** 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 | 13. Insecticide storage | 15. Oil well/Gas well |
| 2. Sewer lines | 5. Cess Pool | 8. Sewage lagoon | 11. Fuel storage | 14. Abandon water well | 16. Other (specify below) |
| 3. Watertight sewer line | 6. Seepage pit | 9. Feed yard | 12. Fertilizer storage | None Apparent | |

Direction from well? _____ How many feet? _____

| From | To | LITHOLOGIC LOG | From | To | LITHOLOGIC LOG |
|------|----|----------------|------|----|----------------|
| 0 | 3 | topsoil | | | |
| 3 | 25 | fine sand | | | |
| 25 | 45 | medium sand | | | |
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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/year) **11/28/17** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **236** This water well record was completed on (mo/day/year) **11/30/17**
 under the business name of **Harp Well and Pump Service** by (signature) **Todd S. Harp**