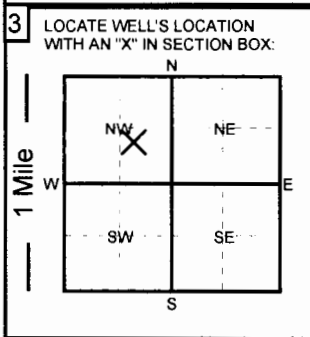


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: Sedgwick	FRACTION NW 1/4 SE 1/4 NW 1/4	SECTION NUMBER 34	TOWNSHIP NUMBER T 27 S	RANGE NUMBER R 2E EW
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Distance and direction from nearest town or city street address of well if located within city?
1822 S. Stephanie Wichita, Kansas

2 WATER WELL OWNER: KLAUSMEYER CONSTRUCTION	Board of Agriculture, Division of Water Resource
RR#, ST. ADDRESS, BOX #: 10008 W. York	Application Number:
CITY, STATE: Wichita, Kansas	ZIP CODE:



4 DEPTH OF COMPLETED WELL: 86 ft.	ELEVATION:
Depth of groundwater Encountered: _____ ft.	
WELL'S STATIC WATER LEVEL 45 FT. BELOW LAND SURFACE MEASURED ON 8/20/20	
Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm	
Est. Yield: _____ gpm Well water was _____ ft. after _____ hours of pumping @ _____ gpm	
Bore Hole Diameter 12 in. to 86 ft. and _____ in. to _____ ft.	
WELL WATER TO BE USED AS:	
1. Domestic <input type="checkbox"/> 3. Feedlot <input type="checkbox"/> 5. Public water supply <input type="checkbox"/> <u>7. Lawn and garden only</u> <input checked="" type="checkbox"/> 9. Dewatering <input type="checkbox"/> 11. Injection well <input type="checkbox"/>	
2. Irrigation <input type="checkbox"/> 4. Industrial <input type="checkbox"/> 6. Oil field water supply <input type="checkbox"/> 8. Air conditioning <input type="checkbox"/> 10. Monitoring well <input type="checkbox"/>	
Was a chemical/bacteriological sample submitted to Department? YES <input type="checkbox"/> <u>NO</u> <input checked="" type="checkbox"/> ; If yes, what mo/day/yr was sample submitted	
Was Water Well Disinfected? <u>YES</u> <input checked="" type="checkbox"/> NO <input type="checkbox"/>	

5 TYPE OF CASING USED:		5. Wrought Iron		7. Fiberglass		9. Other (Specify below)		CASING JOINTS: <u>Glued</u> <input checked="" type="checkbox"/> Threaded <input type="checkbox"/>	
1. Steel <input type="checkbox"/> 3. RPM (SR) <input type="checkbox"/>		6. Asbestos-Cement		8. Concrete tile		SDR-26		Welded <input type="checkbox"/> Clamped <input type="checkbox"/>	
<u>2. PVC</u> <input checked="" type="checkbox"/> 4. ABS <input type="checkbox"/>									
Blank casing diameter 5 in. to 24 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.									
Casing height above land surface: 12 in., Weight: 2.35 lbs. / ft. Wall thickness or gauge No. .214									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1. Steel <input type="checkbox"/> 3. Stainless Steel <input type="checkbox"/> 5. Fiberglass <input type="checkbox"/> <u>7. PVC</u> <input checked="" type="checkbox"/> 9. ABS <input type="checkbox"/> 11. Other (specify) _____									
2. Brass <input type="checkbox"/> 4. Galvanized <input type="checkbox"/> 6. Concrete Tile <input type="checkbox"/> 8. RMP (SR) <input type="checkbox"/> 10. Asbestos-Cement <input type="checkbox"/> 12. None used (open hole) _____									
SCREEN OR PERFORATION OPENINGS ARE:									
1. Continuous slot <input type="checkbox"/> 3. Mill slot <input type="checkbox"/> 5. Gauzed wrapped <input type="checkbox"/> 7. Torch cut <input type="checkbox"/> 9. Drilled holes <input type="checkbox"/> 11. None (open hole) <input type="checkbox"/>									
2. Louvered shutter <input type="checkbox"/> 4. Key punched <input type="checkbox"/> 6. Wire wrapped <input type="checkbox"/> <u>8. Saw cut</u> <input checked="" type="checkbox"/> 10. Other (specify) _____									
SCREEN - PERFORATION INTERVAL From 24 ft. to 86 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 46 ft. to 86 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									

6 GROUT MATERIALS:		1. Neat cement		2. Cement Grout		3. Bentonite		Other <u>bentonite hole plug</u>	
Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From 4 ft. to 24 ft.									
What is the nearest source of possible contamination:									
1. Septic tank <input type="checkbox"/> 4. Lateral lines <input type="checkbox"/> 7. Pit privy <input type="checkbox"/> 10. Livestock pens <input type="checkbox"/> 13. Insecticide storage <input type="checkbox"/> 15. Oil well/Gas well <input type="checkbox"/>									
2. Sewer lines <input type="checkbox"/> 5. Cess Pool <input type="checkbox"/> 8. Sewage lagoon <input type="checkbox"/> 11. Fuel storage <input type="checkbox"/> 14. Abandon water well <input type="checkbox"/> 16. Other (specify below) _____									
<u>3. Watertight sewer line</u> <input checked="" type="checkbox"/> 6. Seepage pit <input type="checkbox"/> 9. Feed yard <input type="checkbox"/> 12. Fertilizer storage <input type="checkbox"/>									
Direction from well? <u>East</u>		How many feet? 15 ft. plus							

From	To	LITHOLOGIC LOG	From	To	LITHOLOGIC LOG
0	3	topsoil			
3	8	clay			
8	52	brown shale			
52	86	grey shale			

7 Contractor's or Landowner's Certification: This water well was 1. <u>constructed</u> <input checked="" type="checkbox"/> 2. reconstructed <input type="checkbox"/> or 3. plugged <input type="checkbox"/> under my jurisdiction and was completed on (mo/day/year) 8/20/2020 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) 8/24/20
under the business name of Harp Well and Pump Service	by (signature) <i>Todd S. Harp</i>