WATER WELL RECORD Form WWC-5						Division of Water														
	Record					rces App. No.	Townshie ?		Well ID Range Number											
1 LOCATION OF WATER WELL: County: Sedgwick			Fraction SE 1/4 SW 1/4 NW 1/4	NE 1/4	Section Number 17		Township Number T 27 S		Range Number											
					Address who															
2 WELLOWNER: Last Name: DONDLINGER First: Raymond Business: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:																				
	Address: 8900 E. Woodcrest Circle																			
Address:																				
City: Wichita State: Kansas ZIP: 67206  3 LOCATE WELL A DEPOTE OF COMPLETED WELL: 120 # 5 Latitude: 37, 70495 (desired degree)																				
3 LOCATE WITH "X			APLETED WELL: 3		ft.					decimal degrees)										
	SECTION ROX: Depth(s) Groundwater Encountered: 1) It						de:9.7 <u>2.3</u> .3	7.0	······	(decimal degrees)										
N		2) ft.	3) ft., or 4)	Dry We _	ll				J NAD	83 □ NAD 27										
		WELL'S STATIC WA	ΓER LEVEL: <b>22</b> , measured on (mo-day-yr	π. -}03/09/2	23		or Latitude/Long (unit make/mod		ne	,										
NW	×	above land surface.	, measured on (mo-day-yr , measured on (mo-day-yr	·)		K GPS	(WAAS enable													
NW	NE		vater was ft.			☐ Land Survey ☐ Topographic Map														
w -	E	s pumping	pumping gpm			Online Mapper:														
CIV. CE			rater was ft.																	
3w		1	after hours pumping gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC														
		Bore Hole Diameter: 1:	Estimated Yield:gpm Bore Hole Diameter: 12in. to 120 ft. and			Source: Land Survey 🗷 GPS 🗌 Topographic Map														
1 n			in. to				Other													
7 WELL WATER TO BE USED AS:																				
1. Domestic:		5. 🗌 Public W	ater Supply: well ID				ield Water Sup													
	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID													
	Lawn & Garden 7. Aquifer Recharge: well ID					Cased Uncased Geotechnical														
	☐ Livestock 8. ☐ Monitoring: well ID																			
3. ☐ Feedlo							b) Open Loop  Surface Discharge  Inj. of Water													
4. Industr		☐ Recovery			13.  Other (specify):															
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes No If yes, date sample was submitted:																				
Water well disinfected? ■ Yes □ No																				
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other																				
Casing diameter																				
Casing height above land surface																				
TYPE OF SCREEN OR PERFORATION MATERIAL:																				
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)																				
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:																				
Continuous Slot  Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)																				
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped 🗷 Saw Cut ☐ None (Open Hole)																				
SCREEN-PERFORATED INTERVALS: From 25 ft. to 120 ft., From ft., From ft., From ft. to ft.																				
GRAVEL PACK INTERVALS: From 24 ft. to 120 ft., From ft. to ft., From ft., From ft., From ft.																				
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other																				
			ft., From	It. to		п., From	II. to	• • • • • • • • • • • • • • • • • • • •	П.											
Nearest sou		ole contamination:   Lateral Lir	nes		ПΙ	Livestock Pen	з	Insecticid	e Storage	•										
☐ Sewer		Cess Pool		agoon		Fuel Storage		Abandone	d Water	Well										
■ Watertight Sewer Lines																				
☐ Other (Specify)																				
							ITHO LOG (a	ont ) or D	HGGN	IG INTERVALS										
10 FROM	TO		OGIC LOG	FRC	)M	TO I		Ont.) Of F.		O INTERVALS										
0 3		topsoil clay																		
38		gray shale																		
110		limestone																		
		•																		
										- <u> </u>										
				Note	es:															
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 🗷 constructed, $\Box$ reconstructed, or $\Box$ plugged																				
under my jurisdiction and was completed on (mo-day-year) 03/09/2023 and this record is true to the best of my knowledge and belief.																				
Kansas Water Well Contractor's License No236 This Water Well Record was completed on (mo-day-year) 3/11/2023  under the business name of																				
under the	ousiness nan	ne of	Vell and Pump Serv	ice	Sig	nature .Tod	d S.Harp	,												
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.																				
							your records. T	elephone 7												
Visit us at ht	tp://www.kdhe	ks.gov/waterwell/index.html		KSA 8	∠a-12	12		· · · · · · · · · · · · · · · · · · ·	Kevise	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										