

**CORRECTION(S) TO WATER WELL RECORD (WWC-5)**

(to rectify lacking or incorrect information)

County: Butler

Location listed as:

Location ~~changed to:~~

Section-Township-Range: \_\_\_\_\_

17-27S-3E

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_

NE SW SW

Other changes: Initial statements: Sedgwick County

Changed to: Butler County

Comments: \_\_\_\_\_

verification method: Written & legal descriptions, area road map,  
position on plat map, and mapping tool on KGS website.

initials: ARL date: 6/6/2008

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726  
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources; App. No.

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick NE 1/4 SW 1/4 SW 1/4</u>			<u>17</u>	T <u>27B</u>	R <u>3 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>812 Woodstone Cir</u>		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits)			
		Latitude: _____			
		Longitude: _____			
		Elevation: _____			
		Datum: _____			
		Data Collection Method: _____			

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N <table border="1"><tr><td></td><td></td><td></td></tr><tr><td>-- NW --</td><td>-- NE --</td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td>-- SW --</td><td>-- SE --</td><td></td></tr></table> S				-- NW --	-- NE --					-- SW --	-- SE --		<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>78</u> ft.	
	-- NW --	-- NE --												
-- SW --	-- SE --													
Depth(s) Groundwater Encountered (1)..... <u>31</u> ft. (2)..... ft. (3)..... ft.														
WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr. <u>325-08</u>														
Pump test data: Well water was.....ft. after..... hours pumping..... gpm														
Est. Yield.....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 Feedlot 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 <u>X</u> .....; If yes, mo/day/yr														
Sample was submitted..... Water well disinfected? Yes <u>X</u> ..... No .....														

<b>5 TYPE OF CASING USED:</b>		5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued..... <u>X</u> ..... Clamped.....
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded.....
2 PVC	4 ABS	7 Fiberglass		Threaded.....
Blank casing diameter ..... <u>5</u> in. to ..... <u>78</u> ft., Diameter..... in. to ..... ft., Diameter..... in. to ..... ft.				
Casing height above land surface..... <u>16</u> in., Weight ..... <u>160</u> lbs./ft. Wall thickness or guage No. <u>26</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:				
1 Steel	3 Stainless Steel	5 Fiberglass	7 PVC	9 ABS
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement
11 Other (Specify) .....				
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
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut	10 Other (specify) .....
11 None (open hole)				
SCREEN-PERFORATED INTERVALS: From..... <u>58</u> ft. to ..... <u>78</u> ft., From..... ft. to ..... ft.				
GRAVEL PACK INTERVALS: From..... <u>24</u> ft. to ..... <u>78</u> ft., From..... ft. to ..... ft.				

<b>6 GROUT MATERIAL:</b>		1 Neat cement	2 Cement grout	3 Bentonite	4 Other .....
Grout Intervals: From..... <u>4</u> ft. to ..... <u>24</u> 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	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? .....		How many feet? .....			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	4	Clay			
4	15	Blue shale			
15	33	Clay + sand			
33	34	limestone broken			
34	76	Blue shale			
76	78	broken limestone			

<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b>	
This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3-28-08</u> and this record is true to the best of my knowledge and belief	
Kansas Water Well Contractor's License No. ....	This Water Well Record was completed on (mo/day/year) <u>4-19-08</u>
under the business name of <u>Chase Drilling</u> by (signature) <u>Chase</u>	

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline 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/index.html>.