

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

1 LOCATION OF WATER WELL		Fraction County: BUTLER SW 1/4 NW 1/4 NW 1/4				Section Number 29	Township Number T 27 S	Range Number R 3 E EM	
Distance and direction from nearest town or city?				Street address of well if located within city? 1220 Colleen Terrace, Wichita, Ks.					
2 WATER WELL OWNER: Bob Sloan		Board of Agriculture, Division of Water Resources Application Number:							
RR#, St. Address, Box # : 1220 Colleen Terrace									
City, State, ZIP Code : Wichita, Ks.									
3 DEPTH OF COMPLETED WELL . . . . . 4.5 . . . . . ft. Bore Hole Diameter . . . . . 11 . . . . . in. to . . . . . ft., and . . . . . in. to . . . . . ft.									
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	10 Observation well	12 Other (Specify below)				
2 Irrigation	4 Industrial	7 Lawn and garden only							
Well's static water level . . . . . 18 . . . . . ft. below land surface measured on . . . . .		11 . . . . . month . . . . . 26 . . . . . day . . . . . 80 . . . . . year							
Pump Test Data : Well water was . . . . . ft. after . . . . . gpm		hours pumping . . . . .			gpm				
Est. Yield gpm: Well water was . . . . . ft. after . . . . . gpm		hours pumping . . . . .			gpm				
4 TYPE OF BLANK 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 dia . . . . . 5 . . . . . in. to . . . . . 20 . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.									
Casing height above land surface . . . . . 12 . . . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No . . . . . 200 . . . . .									
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-cement						
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) . . . . .					
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole) . . . . .					
Screen or Perforation Openings Are:		5 Gauzed wrapped	8 Saw cut . . . . . 06	11 None (open hole) . . . . .					
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes						
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) . . . . .						
Screen-Perforation Dia . . . . . 5 . . . . . in. to . . . . . 45 . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.									
Screen-Perforated Intervals: From . . . . . 20 . . . . . ft. to . . . . . 45 . . . . . ft., From . . . . . ft. to . . . . . ft.									
From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.									
Gravel Pack Intervals: From . . . . . 14 . . . . . ft. to . . . . . 45 . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.									
5 GROUT MATERIAL: 1 Neat cement		2 Cement grout	3 Bentonite	4 Other . . . . .					
Grouted Intervals: From . . . . . 40" . . . . . ft. to . . . . . 14 . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.									
What is the nearest source of possible contamination:									
1 Septic tank	4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well . . . . .					
2 Sewer lines	5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well . . . . .					
3 Lateral lines	6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below) . . . . .					
Direction from well . . . . . West . . . . . How many feet . . . . . 78 . . . . . ?		Water Well Disinfected? Yes . . . X . . . No . . .							
Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No . . . . . X . . . . .		If yes, date sample . . . . .							
was submitted . . . . . month . . . . . day . . . . . year: Pump Installed? Yes . . . . . No . . . . . X . . . . .									
If Yes: Pump Manufacturer's name . . . . .		Model No. . . . . HP . . . . . Volts . . . . .							
Depth of Pump Intake . . . . . ft.		Pumps Capacity rated at . . . . . gal./min							
Type of pump: 1 Submersible		2 Turbine	3 Jet	4 Centrifugal	5 Reciprocating	6 Other . . . . .			
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on . . . . . 11 . . . . . month . . . . . 26 . . . . . day . . . . . 80 . . . . . year									
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 . . . . . 2 . . . . . month . . . . . 11 . . . . . day . . . . . 81 . . . . . year under the business name of Harp Well & Pump Serv., Inc. by (signature) <i>m. Arnold</i>									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG	
N		0	3	Topsoil					
W		3	6	Clay					
E		6	28	Brown Shale					
S		28	45	Grey Shale					
1 Mile									
ELEVATION:									
Depth(s) Groundwater Encountered 1 . . . . . 18 . . . . . ft. 2 . . . . . ft. 3 . . . . . ft. 4 . . . . . ft.		(Use a second sheet if needed)							
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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									