

WATER WELL RECORD Form WWC-5 KSA 82a-1212					
1 LOCATION OF WATER WELL: County: SEDGWICK		Fraction <u>NW SW</u> 1/4 NW 1/4 NE 1/4	Section Number 34	Township Number T 28 S	Range Number R 1 E EW
Distance and direction from nearest town or city street address of well if located within city? 6510 South Grove Wichita, Kansas					
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		Don Hayes 4356 North Ridge Road Wichita, Kansas Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N --- NW --- X NE --- --- SW --- SE --- S W E		4 DEPTH OF COMPLETED WELL <u>24</u> ft. ELEVATION: _____ Depth(s) Groundwater Encountered 1. <u>11</u> ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>11</u> ft. below land surface measured on mo/day/yr <u>11-7-89</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>14</u> in. to _____ ft., and _____ in. to _____ ft.			
5 TYPE OF BLANK CASING USED: Blank casing diameter <u>5</u> in. to <u>16</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>12</u> in., weight <u>1.59</u> lbs./ft. Wall thickness or gauge No. <u>.203</u> TYPE OF SCREEN OR PERFORATION MATERIAL: SCREEN OR PERFORATION OPENINGS ARE: SCREEN-PERFORATED INTERVALS: GRAVEL PACK INTERVALS:					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals: From <u>4</u> ft. to <u>15</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: Direction from well? _____ How many feet? _____					
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) <u>11-7-89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>236</u> This Water Well Record was completed on (mo/day/yr) <u>4-1-90</u> under the business name of <u>Harp Well & Pump Service, Inc.</u> by (signature) <u>Mary Arnold</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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.					