

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number																		
County: Sedgwick		SW NE SE		30	T 28s S R 2e EW																			
Distance and direction from nearest town or city street address of well if located within city? 2809 Rough Creek				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																				
2 WATER WELL OWNER: Bert White RR#, St. Address, Box # : 2809 Rough Creek City, State, ZIP Code : Derby, Ks 67037																								
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 82 ft.																						
N <table border="1" style="margin: auto;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td></td><td>NE</td></tr> <tr><td>W</td><td></td><td>E</td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> <tr><td></td><td>X</td><td></td></tr> <tr><td></td><td>S</td><td></td></tr> </table>					NW		NE	W		E	SW		SE		X			S		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 22 ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 20 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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well				
		NW		NE																				
		W		E																				
		SW		SE																				
	X																							
	S																							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No x ; If yes, mo/day/yr																								
Sample was submitted _____ Water Well Disinfected? Yes x No _____																								
5 TYPE OF CASING USED:																								
1 Steel		3 RMP (SR)		6 Asbestos-Cement		8 Concrete tile																		
2 PVC		4 ABS		7 Fiberglass		9 Other (specify below)																		
Blank casing diameter 5 in. to 22 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.																								
Casing height above land surface 12 in., Weight 2.40 lbs./ft. Wall thickness or gauge No. 160psi																								
TYPE OF SCREEN OR PERFORATION MATERIAL:																								
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC																		
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)																		
						9 ABS																		
						10 Asbestos-Cement																		
						11 Other (specify)																		
						12 None used (open hole)																		
SCREEN OR PERFORATION OPENINGS ARE:																								
1 Continuous slot		3 Mill slot		5 Guaze wrapped		7 Torch cut																		
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut																		
						9 Drilled holes																		
						11 None (open hole)																		
SCREEN-PERFORATED INTERVALS: From 22 ft. to 82 ft. From _____ ft. to _____ ft.																								
GRAVEL PACK INTERVALS: From 22 ft. to 82 ft. From _____ ft. to _____ ft.																								
From _____ ft. to _____ ft.																								
6 GROUT MATERIAL:																								
1 Neat cement		2 Cement grout		3 Bentonite		4 Other																		
Grout Intervals From 3 ft. to 22 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																		
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage																		
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage																		
						13 Insecticide Storage																		
						14 Abandoned water well																		
						15 Oil well/ gas well																		
						16 Other (specify below)																		
Direction from well? West				How many feet? 40																				
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS																			
0	3	Top soil																						
3	20	Clay																						
20	27	Fine sand																						
27	48	Limestone																						
48	82	Blue shale																						
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) 9-25-07 and this record is true to the best of my knowledge and belief.																								
Kansas Water Well Contractor's License No. 740 This Water Well Record was completed on (mo/day/year) 10-15-07																								
under the business name of Weninger Drilling Inc. by (signature) _____																								
INSTRUCTIONS: Please fill in blanks 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 .																								

Driller Copy
White

KSA 82a-1212

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