

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		SW ¼ SE ¼ SE ¼		7		T 28 S		R 2 E	
Distance and direction from nearest town or city street address of well if located within city? SE of Building 1349, McConnell Air Force Base - Wichita									
2 WATER WELL OWNER: 22nd CES CEVQ US Air Force									
RR#, St. Address, Box # : 53000 Hutchinson St., Ste. 109 MAFB						Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Wichita, KS 67221						Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 34 ft. ELEVATION:							
1 Mile NW NE SW SE W E S X		Depth(s) Groundwater Encountered 1 18 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr 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 13 in. to 35 ft. and _____ in. to _____ ft. 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 Lawn and garden (domestic) 10 Monitoring well Recovery Well Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No X							
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) _____ Welded _____									
7 Fiberglass _____ Threaded Flush									
Blank casing diameter 6 in. to 7 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface Flush in., weight 0.703 lbs./ft. Wall thickness or gauge No. SCH. 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____									
9 ABS 12 None used (open hole) _____									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes									
7 Torch cut 10 Other (specify) _____									
SCREEN-PERFORATED INTERVALS: From 7 ft. to 34 ft. From _____ ft. to _____ ft.									
From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 5 ft. to 35 ft. From _____ ft. to _____ 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 1 ft. to 5 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 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____									
13 Insecticide storage _____									
Direction from well? _____ How many feet? _____									
FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0.0 35.0 Silty Clay, dark brown to olive brown to very light olive brown, with gravel from 0' to 2.5'									
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/yr) 03/13/09 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 06/19/09									
under the business name of Geotechnical Services Inc. by (signature) [Signature]									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									

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