

WATER WELL RECORD Form WWC-5 KSA 82a-1212							
1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number		
County: <u>Sedgewick</u>		<u>SE 1/4 NW 1/4 SE 1/4</u>	<u>9</u>	<u>T 29 S</u>	<u>R 10 E</u>		
Distance and direction from nearest town or city street address of well if located within city? <u>See Below</u>							
2 WATER WELL OWNER:				Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : <u>Kelley Spicer</u>				Application Number:			
City, State, ZIP Code : <u>8551 So Lulia Wichita KS 67233</u>							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>36</u> ft. ELEVATION:					
		Depth(s) Groundwater Encountered 1. <u>18</u> ft. 2. _____ ft. 3. _____ ft.					
		WELL'S STATIC WATER LEVEL <u>18</u> ft. below land surface measured on mo/day/yr <u>7-7-89</u>					
		Pump test data: Well water was <u>18</u> ft. after <u>1/2</u> hours pumping <u>20</u> gpm					
		Est. Yield <u>60</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
		Bore Hole Diameter <u>11</u> in. to <u>36</u> ft., and _____ in. to _____ ft.					
		WELL WATER TO BE USED AS: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Injection well <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Lawn and garden only <input type="checkbox"/> Monitoring well <input type="checkbox"/> Other (Specify below)					
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____					
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____					
1 Steel		<input checked="" type="radio"/> 3 RMP (SR)		5 Wrought iron		8 Concrete tile	
2 PVC		<input checked="" type="radio"/> 4 ABS		6 Asbestos-Cement		9 Other (specify below)	
				7 Fiberglass		Threaded _____	
Blank casing diameter <u>5</u> in. to _____ 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>SOR-26</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC					
1 Steel		3 Stainless steel		5 Fiberglass		<input checked="" type="radio"/> 8 RMP (SR)	
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS	
						10 Asbestos-cement	
						11 Other (specify) _____	
						12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped					
1 Continuous slot		<input checked="" type="radio"/> 3 Mill slot		6 Wire wrapped		8 Saw cut	
2 Louvered shutter		4 Key punched		7 Torch cut		9 Drilled holes	
						10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS:		From <u>27</u> ft. to <u>36</u> ft., From _____ ft. to _____ ft.					
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS:		From <u>18</u> ft. to <u>36</u> ft., From _____ ft. to _____ ft.					
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:		1 Neat cement					
		<input checked="" type="radio"/> 2 Cement grout		3 Bentonite		4 Other _____	
Grout intervals: From <u>3</u> ft. to <u>18</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
What is the nearest source of possible contamination:		10 Livestock pens					
<input checked="" type="radio"/> 1 Septic tank		4 Lateral lines		7 Pit privy		14 Abandoned water well	
2 Sewer lines		5 Cess pool		8 Sewage lagoon		15 Fuel storage	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		16 Fertilizer storage	
						10 Insecticide storage	
Direction from well? <u>West</u>		How many feet? <u>100</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS		
<u>0</u>	<u>2</u>	<u>Top Soil</u>					
<u>2</u>	<u>13</u>	<u>Clay</u>					
<u>13</u>	<u>36</u>	<u>Sand</u>					
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>7-7-89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>318</u> This Water Well Record was completed on (mo/day/yr) <u>7-12-89</u> under the business name of <u>Weninger Drilling</u> by (signature) <u>[Signature]</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.							