

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 SW ¼ NE ¼ SW ¼	28	T 26s S	R 1w E/W
Distance and direction from nearest town or city street address of well if located within city? 8222 W Palmetto Circle			Global Positioning System (decimal degrees, min. of 4 digits)		
			Latitude: _____		
			Longitude: _____		
			Elevation: _____		
			Datum: _____		
			Data Collection Method: _____		

2 WATER WELL OWNER: Mike Small RR#, St. Address, Box # : 8222 W Palmetto Circle City, State, ZIP Code : Wichita KS 67235		3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 60 ft.	
				Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 30 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) ☒ Irrigation 4 Industrial <u>7 Domestic (lawn & garden)</u> 10 Monitoring well	
				Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes <u>X</u> No _____	

5 TYPE OF CASING USED:		5 Wrought Iron		8 Concrete tile		CASING JOINTS: Glued <u>X</u> Clamped	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		Welded	
<u>2</u> PVC		4 ABS		7 Fiberglass		Threaded	
Blank casing diameter 5 in. to 60 ft., Dia		_____ in. to _____ ft., Dia		_____ in. to _____ ft., Dia		_____ in. to _____ ft., Dia	
Casing height above land surface 12 in., Weight 2.40 lbs./ft.		_____ lbs./ft.		Wall thickness or gauge No. 160 psi		_____ psi	
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass		<u>7</u> 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		<u>3</u> Mill slot		5 Gauge wrapped		7 Torch cut	
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut	
9 Drilled holes		11 None (open hole)		10 Other (specify)		_____	
SCREEN-PERFORATED INTERVALS:							
From 50 ft. to 60 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS:							
From 30 ft. to 60 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	

6 GROUT MATERIAL:		1 Neat cement		2 Cement grout		<u>3</u> Bentonite		4 Other _____	
Grout Intervals From 3 ft. to 30 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ 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		13 Insecticide Storage	
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage		14 Abandoned water well	
<u>3</u> Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage		15 Oil well/ gas well	
16 Other (specify below)		_____		_____		_____		_____	
Direction from well? West		How many feet? 30		_____		_____		_____	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top soil			
1	13	Clay			
13	40	Gravel			
40	46	Fine sand			
46	60	Med sand			

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) **4-25-08** and this record is true to the best of my knowledge and be Kansas Water Well Contractor's License No. **740**. This Water Well Record was completed on (mo/day/year) **5-01-08** under the business name of **Weninger Drilling Inc.** by (signature) *[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 \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell>.

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KSA 82a-1212

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