

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:

County: Sedgwick

Fraction

NE 1/4 NE 1/4 SW 1/4

Section Number

32

Township Number

T S26

Range Number

R 1 EW

Distance and direction from nearest town or city street address of well if located within city?

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____

Longitude: _____

Elevation: _____

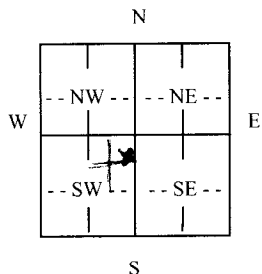
Datum: _____

Data Collection Method: _____

2 WATER WELL OWNER:

RR#, St. Address, Box # : J. R. Hudgins
3334 N. Grey meadow
City, State, ZIP Code : Wichita KS

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL 70 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL 23 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

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

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)

2 PVC 4 ABS

5 Wrought Iron 6 Asbestos-Cement

7 Fiberglass

8 Concrete tile

9 Other (specify below)

CASING JOINTS: Glued X..... Clamped.....

Welded.....

Threaded.....

Blank casing diameter 5 in. to 70 ft., Diameter..... in. to ft., Diameter..... in. to ft.Casing height above land surface 16 in., Weight 160 lbs./ft. Wall thickness or gauge No. 26

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel 3 Stainless Steel

2 Brass 4 Galvanized Steel

5 Fiberglass

6 Concrete tile

7 PVC

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 Gauzed wrapped

7 Torch cut

9 Drilled holes

11 None (open hole)

2 Louvered shutter 4 Key punched

6 Wire wrapped

8 Saw cut

10 Other (specify)

SCREEN-PERFORATED INTERVALS: From 50 ft. to 70 ft., From..... ft. to ft.

From..... ft. to ft., From..... ft. to ft.

GRAVEL PACK INTERVALS: From 25 ft. to 80 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 4 ft. to 24 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

16 Other (specify

2 Sewer lines

5 Cess pool

8 Sewage lagoon

11 Fuel storage

14 Abandoned water well

below)

3 Watertight sewer lines

6 Seepage pit

9 Feedyard

12 Fertilizer storage

15 Oil well/gas well

Direction from well? NorthHow many feet? 21'

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0	2	Top Soil			
2	21	Sandy Clay			
21	70	med Fine Sand streaks			

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) 3/16/09 and this record is true to the best of my knowledge and belief.Kansas Water Well Contractor's License No. 6611 This Water Well Record was completed on (mo/day/year) 4/13/09 under the business name of Chase Drilling by (signature) D. ChaseINSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRM 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, 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/index.html>.