

WATER WELL RECORD ^{NW SW SE NE} Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		NW 1/4 SE 1/4 NE 1/4	33	T 26s S 1w E/W	
Distance and direction from nearest town or city street address of well if located within city? 3418 N Lakeridge Ct			Global Positioning System (decimal degrees, min. of 4 digits)		
2 WATER WELL OWNER: Dave Dechart			Latitude: _____		
RR#, St. Address, Box #: 3418 N Lakeridge Ct			Longitude: _____		
City, State, ZIP Code: Wichita, Ks 67235			Elevation: _____		
			Datum: _____		
			Data Collection Method: _____		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 53 ft.
	Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 19 ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 25 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 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:	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued x Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) _____
2 PVC	4 ABS	7 Fiberglass	_____ Welded
Blank casing diameter 5 in. to 43 ft., Dia	_____ in. to _____ ft., Dia	_____ in. to _____ ft.	_____ Threaded
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	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 43 ft. to 53 ft.	From _____ ft. to _____ ft.		
GRAVEL PACK INTERVALS:	From 20 ft. to 53 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 3 ft. to 20 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
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	15 Oil well/ gas well
16 Other (specify below) _____				
Direction from well? North	How many feet? 15ft			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top soil			
1	11	Clay			
11	18	gravel			
18	22	Clay			
22	33	Fine sand			
33	50	Gravel			
50	53	Fine 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) **3-2-09** 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) **3-15-09**

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>.