

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:

County: Sedgwick

Fraction

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

Section Number

28

Township Number

T S 26

Range Number

R 1 E/WDistance and direction from nearest town or city street address of well if located within city? X

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

Latitude: _____

Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

2 WATER WELL OWNER:

RR#, St. Address, Box #

City, State, ZIP Code

Thien Tran
3834 Lakewood
Wichita KS

3 LOCATE WELL'S

LOCATION

WITH AN "X" IN SECTION BOX:

N

-- NW --		-- NE --	
-- SW --		-- SE --	

S

4 DEPTH OF COMPLETED WELL ft.

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

WELL'S STATIC WATER LEVEL..... 12 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 wellWas a chemical/bacteriological sample submitted to Department? Yes No X.....; If yes, mo/day/yrSample 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 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

2 Louvered shutter

4 Key punched

5 Gauzed wrapped

7 Torch cut

9 Drilled holes

11 None (open hole)

6 Wire wrapped

8 Saw cut

10 Other (specify)

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

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

GRAVEL PACK INTERVALS: From 24 ft. to 60 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 ft. to ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank

2 Sewer lines

3 Watertight sewer lines

4 Lateral lines

5 Cess pool

6 Seepage pit

7 Pit privy

8 Sewage lagoon

9 Feedyard

10 Livestock pens

11 Fuel storage

12 Fertilizer storage

13 Insecticide storage

14 Abandoned water well

15 Oil well/gas well

16 Other (specify

below)

Direction from well?

How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Top Soil			
4	11	Clay			
11	21	Fine Sand			
21	26	Clay			
26	47	Med Fine Sand			
47	60	Med Coarse 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) 7/17/09 and this record is true to the best of my knowledge and belief.Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/year) 9/27/09 under the business name of Chase Drilling by (signature) D. ChaseINSTRUCTIONS: 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, 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>.