

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

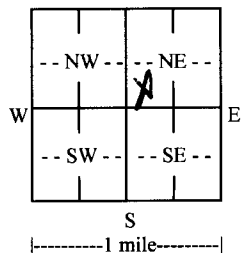
Division of Water  
Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: Sedgwick Fraction 1/4 SW 1/4 Section Number 33 Township Number T 26S Range Number R 1 E 1W

2 WELL OWNER: Last Name: marsh First: Gerry Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☒  
Business: 3446 N Lakeridge Ct  
Address: Wichita City: KS State: KS ZIP: 67205

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 60 ft.  
Depth(s) Groundwater Encountered: 1) ..... ft.  
2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well  
WELL'S STATIC WATER LEVEL: 20 ft.  
☒ below land surface, measured on (mo-day-yr) .....  
☐ above land surface, measured on (mo-day-yr) .....  
Pump test data: Well water was ..... ft.  
after ..... hours pumping ..... gpm  
Well water was ..... ft.  
after ..... hours pumping ..... gpm  
Estimated Yield: 50 gpm  
Bore Hole Diameter: 12 in. to 60 ft. and  
..... in. to ..... ft.

5 Latitude: ..... (decimal degrees)  
Longitude: ..... (decimal degrees)  
Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27  
Source for Latitude/Longitude:  
☐ GPS (unit make/model: .....)  
(WAAS enabled? ☐ Yes ☐ No)  
☐ Land Survey ☐ Topographic Map  
☐ Online Mapper: .....

6 Elevation: ..... ft. ☐ Ground Level ☐ TOC  
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map  
☐ Other .....

## 7 WELL WATER TO BE USED AS:

- |                                                                                                                                               |                                        |                                     |                                        |                                                                |                                                               |                                                             |                                                       |                                                                                                                                                                                                           |                                                                  |                                                                                                                                       |                                                                                                                                                                                                                                 |                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------------------|----------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| 1. Domestic:<br><input type="checkbox"/> Household<br><input checked="" type="checkbox"/> Lawn & Garden<br><input type="checkbox"/> Livestock | 2. <input type="checkbox"/> Irrigation | 3. <input type="checkbox"/> Feedlot | 4. <input type="checkbox"/> Industrial | 5. <input type="checkbox"/> Public Water Supply: well ID ..... | 6. <input type="checkbox"/> Dewatering: how many wells? ..... | 7. <input type="checkbox"/> Aquifer Recharge: well ID ..... | 8. <input type="checkbox"/> Monitoring: well ID ..... | 9. Environmental Remediation: well ID .....<br><input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction<br><input type="checkbox"/> Recovery <input type="checkbox"/> Injection | 10. <input type="checkbox"/> Oil Field Water Supply: lease ..... | 11. Test Hole: well ID .....<br><input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical | 12. Geothermal: how many bores? .....<br>a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical<br>b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water | 13. <input type="checkbox"/> Other (specify): ..... |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------------------|----------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted: .....  
Water well disinfected? ☒ Yes ☐ No

8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other ..... CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded  
Casing diameter ..... in. to 59 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface ..... in. Weight 24 lbs./ft. Wall thickness or gauge No. 1100psi

TYPE OF SCREEN OR PERFORATION MATERIAL:

- ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☒ PVC ☐ Other (Specify) .....  
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☒ None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

- ☐ Continuous Slot ☒ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) .....  
☐ Louvered Shutter ☒ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 50 ft. to 60 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 20 ft. to 60 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....  
Grout Intervals: From 3 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Nearest source of possible contamination:

- |                                                            |                                        |                                        |                                             |                                               |
|------------------------------------------------------------|----------------------------------------|----------------------------------------|---------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Septic Tank                       | <input type="checkbox"/> Lateral Lines | <input type="checkbox"/> Pit Privy     | <input type="checkbox"/> Livestock Pens     | <input type="checkbox"/> Insecticide Storage  |
| <input type="checkbox"/> Sewer Lines                       | <input type="checkbox"/> Cess Pool     | <input type="checkbox"/> Sewage Lagoon | <input type="checkbox"/> Fuel Storage       | <input type="checkbox"/> Abandoned Water Well |
| <input checked="" type="checkbox"/> Watertight Sewer Lines | <input type="checkbox"/> Seepage Pit   | <input type="checkbox"/> Feedyard      | <input type="checkbox"/> Fertilizer Storage | <input type="checkbox"/> Oil Well/Gas Well    |
| <input type="checkbox"/> Other (Specify) .....             |                                        |                                        |                                             |                                               |

Direction from well? East Distance from well? 40' ft.

| 10 FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---------|----|----------------|------|----|------------------------------------------|
| 0       | 3  | Top Soil       |      |    |                                          |
| 3       | 20 | Clay           |      |    |                                          |
| 20      | 38 | Med Sand       |      |    |                                          |
| 38      | 41 | Clay           |      |    |                                          |
| 41      | 60 | Med Sand       |      |    |                                          |

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-yr) 2009-10 and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. 770 This Water Well Record was completed on (mo-day-yr) 4-24-13  
under the business name of Werner Drilling Inc

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$4.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 9/10/2012