

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: Sedgewick

Fraction: 1/4 SE 1/4 SE 1/4 SE 1/4

Section Number: 13

Township Number: T 26 S

Range Number: R 1 E W

2 WELL OWNER:

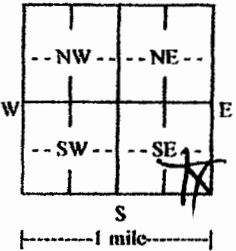
Last Name: Wallford First: _____

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 Address: 2605 W 58th
Address: Wichita
City: Wichita State: K-2 ZIP: 67204

2605 W 58th

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 41 ft.

Depth(s) Groundwater Encountered: 1) 21 ft.
2) _____ ft. 3) _____ ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: 27 ft.

below land surface, measured on (mo-day-yr) 6-25-15
 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: _____ gpm

Bore Hole Diameter: 9 in. to 21 in. to _____ in. to _____ in.

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:

- Household
- Lawn & Garden
- Livestock

2. Irrigation

- Feedlot
- Industrial

5. Public Water Supply: well ID _____

6. Dewatering: how many wells? _____

7. Aquifer Recharge: well ID _____

8. Monitoring: well ID _____

9. Environmental Remediation: well ID _____

- Air Sparge Soil Vapor Extraction
- Recovery Injection

10. Oil Field Water Supply: lease _____

11. Test Hole: well ID _____

- Cased Uncased Geotechnical

12. Geothermal: how many bores? _____

- a) Closed Loop Horizontal Vertical

- b) Open Loop Surface Discharge Inj. of Water

13. 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 5 in. to 31 in. Diameter _____ in. to _____ in.

Casing height above land surface 12 in. Weight _____ lbs./ft. Wall thickness or gauge No. 160

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 31 ft. to 41 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From none ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout intervals: From 0 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

Nearest source of possible contamination:

- Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
- Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well
- Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well
- Other (Specify) _____

Direction from well? South Distance from well? 11 ft.

10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	11	Top soil			
11	24	Fine tan sand			
24	41	Coarse tan 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) 6-25-15 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 712 This Water Well Record was completed on (mo-day-yr) 6-25-15.

under the business name of Brandon Pump & Well

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 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.