WATER WELL RECORD Form WWC-5 Division of Water										
Original R						sources App. N		☐ Well ID		
1 LOCATION OF WATER WELL:			Fraction		ection Numbe			nge Number		
County: SEDGWICK				SW 1/4 NE 1/4 NE 1/4				1 DE W		
2 WELL O	WNER: L	ist Name: KU	RDI	First: WALLY	Street or Rural Address where well is located (if unknown, distance and					
Business: Address: 4513 NORTH JILL CIR.									check here:	
Address:										
City:	MAIZE		State: KS	ZIP: 67101						
3 LOCATE		4 DEDTH	LOE CON	DIETED WELL.	60	f) = T - 414			(1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
WITH "X"			H OF COMPLETED WELL:60 froundwater Encountered: 1)				5 Latitude:			
SECTION N	BOX:			3) ft., or 4)		Long	ontal Datum: WGS	84 D NAD	(decimal degrees)	
14		WELL'S ST	TATIC WA	TER LEVEL:1	8 ft.	Source	for Latitude/Longitu		0.5 🗀 11/11/27	
	{	below land surface, measured on (mo-day-yr). 4/3					PS (unit make/model:)	
NW	- NE	above land surface, measured on (mo-day-yr)				1	(WAAS enabled? ☐ Yes ☐ No)			
		Pump test data: Well water was ft. after hours pumping gpm					☐ Land Survey ☐ Topographic Map			
W E		Well water was ft.					☐ Online Mapper:			
SW SE		after hours pumping gpm								
		Estimated Yield:20+gpm				6 Elevation:ft. Ground Lev				
S	Bore Hole I	Bore Hole Diameter:10.5 in. to60 ft			Source: Land Survey GPS Topographic Map					
mile in. to										
7 WELL WATER TO BE USED AS:										
1. Domestic:							10. Oil Field Water Supply: lease			
				g: how many wells? echarge: well ID			11. Test Hole: well ID			
☐ Livestock				g: well ID			nermal: how many bo			
_	2. ☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot ☐ Air Sparge				e 🔲 Soil Vapor I	Soil Vapor Extraction b) Open Loop 🔲 Sur			e Discharge 🔲 Inj. of Water		
	4. ☐ Industrial ☐ Recovery ☐ Injection 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 diameter 5 in to 60 ft. Diameter in to ft. Diameter in to ft. Casing height above land surface 16 in. Weight lbs./ft. Wall thickness or gauge No. SDR-26										
Casing height above land surface										
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 .40 ft. to .60 ft., From ft., From ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other										
Nearest source	s: - FIOHE e of possible	II. IC	on:	II., From	π. το	II., From	tt. to	II.		
Nearest source of possible contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage										
☐ Sewer Lir			Cess Pool	☐ Sewage La	goon [Fuel Storage	☐ Abai	ndoned Water		
■ Watertight Sewer Lines □ Scepage Pit □ Feedvard □ Fertilizer Storage □ Oil Well/Gas Well										
☐ Other (Specify) Direction from well? SOUTH Distance from well? 16 ft.										
10 FROM	TO TO		ITHOLO	Distance from w	ell?	T/\ T	LITHO LOCA	II.	IC INTERPRETATE	
0 1		OP SOIL	LITHOLOG	JIC LUG	FROM	TO	LITHO. LOG (cont.)	or PLUGGIN	GINTERVALS	
1 10		CLAY								
16 2		SANDY CLA	Y							
20 6		IED GRAV								
				-						
					Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed or plugged										
11 CONTRA	ACTOR'S	OR LAND	OWNER'	S CERTIFICATION	This wat	er well was	constructed, 🗌 re	constructed.	or plugged	
under my juri	isdiction ar	id was comp	ieted on (n	no-day-year) .4/30/20	JJ.Ö an	d this record i	s true to the best of	my knowled	ige and belief. /2018	
under the bus	i wen Con iness name	of WENIN	IGER DR	This WallLING, LLC	ner well Re	ccord was cor Signature was	npieted on (mo-day	-year)	AN 1.0	
Mail 1 w	vhite copy alo	ng with a fee of	\$5.00 for eac	ch constructed well to: Kar	ısas Departme	nt of Health and	Environment, Bureau of	Water, GWTS	Section,	
1000 SV	W Jackson St	., Suite 420, Top	oeka, Kansas	66612-1367. Mail one to	Water Well O	wner and retain o		ephone 785-296	5-5524.	
Visit us at http://www.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										