

**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: **SEDWICK**

Fraction  
NE 1/4 NE 1/4 NE 1/4 NW 1/4

Section Number  
**33**

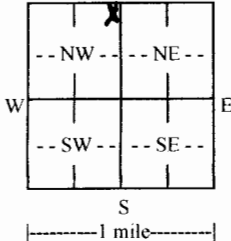
Township Number  
T **26** S

Range Number  
R **1**  E  W

**WELL OWNER:** Last Name: \_\_\_\_\_ First: \_\_\_\_\_  
Business: **TRADEMARK INC.**  
Address: \_\_\_\_\_  
Address: **7540 WEST NORTHWIND STE. 100**  
City: **WICHITA** State: **KS** ZIP: **67205**

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:   
**8348 WEST KACKLEY CT, WICHITA, KS, 67205**

**3 LOCATE WELL WITH "X" IN SECTION BOX:**



**4 DEPTH OF COMPLETED WELL:** ..... **56** ..... ft.  
Depth(s) Groundwater Encountered: 1) ..... ft.  
2) ..... ft. 3) ..... ft., or 4)  Dry Well  
WELL'S STATIC WATER LEVEL: ..... **10** ..... ft.  
 below land surface, measured on (mo-day-yr) **4/8/2019**.  
 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: **20** ..... gpm  
Bore Hole Diameter: **11.5** in. to **56** ft. and  
..... in. to ..... ft.

**5 Latitude:** ..... (decimal degrees)  
**Longitude:** ..... (decimal degrees)  
Horizontal 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 ..... | <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 ..... | 12. Geothermal: how many bores? ..... | 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 ..... **5** ..... in. to ..... **56** ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. **SDR-26**.....

**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 **36** ..... ft. to **56** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From **24** ..... ft. to **56** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....  
Grout Intervals: From **3** ..... ft. to **23** ..... 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? **90+** ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	TOP SOIL			
2	13	CLAY			
13	16	MED SAND			
16	19	CLAY			
19	34	MED SAND			
34	38	CLAY			
38	59	GRAVEL			Notes:
59	60	CLAY			

**11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo-day-year) **4/10/2019**..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **884**..... This Water Well Record was completed on (mo-day-year) **4/18/2019**..... under the business name of **WENINGER DRILLING LLC**..... Signature *Mark Krzyzanski*