

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: SEDGWICK		SW ¼ NW ¼ SW ¼		2		T 26S S		R 2W E/W			
Distance and direction from nearest town or city street address of well if located within city? 15101 W 72ND ST N, COLWICH				Global Positioning System (decimal degrees, min. of 4 digits)							
2 WATER WELL OWNER: DOUG ECK				Latitude: _____							
RR#, St. Address, Box # : 15740				Longitude: _____							
City, State, ZIP Code : COLWICH, KS 67030				Elevation: _____							
				Datum: _____							
				Data Collection Method: _____							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 58 ft.									
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.									
		WELL'S STATIC WATER LEVEL 31 ft. below land surface measured on mo/day/yr									
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Est. Yield 25 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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
		2 Irrigation 4 Industrial 5 Domestic (lawn & garden) 10 Monitoring well									
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yr									
		Sample was submitted _____ Water Well Disinfected? Yes X No _____									
5 TYPE OF CASING USED:				5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____							
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____											
2 PVC 4 ABS 7 Fiberglass Threaded _____											
Blank casing diameter 5 in. to 45 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.											
Casing height above land surface 12 in., Weight 2.40 lbs./ft. Wall thickness or gauge No. _____											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____											
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)											
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____											
SCREEN-PERFORATED INTERVALS:											
From 45 ft. to 58 ft. From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From 31 ft. to 58 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 3 ft. to 31 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:											
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)											
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well											
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well											
Direction from well? NORTHWEST How many feet? 180											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		1		TOP SOIL							
1		14		FINE SAND							
14		16		CLAY							
16		46		FINE SAND							
46		53		MED SAND							
53		55		CLAY							
55		58		FINE 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) 6-4-08 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No. 740 This Water Well Record was completed on (mo/day/year) 7-7-08											
under the business name of WENINGER DRILLING INC by (signature) _____											
INSTRUCTIONS: Please fill in blanks 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 .											