

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		NW ¼ SE ¼ SW ¼	28	T 27 S	R 01 W
Distance and direction from nearest town or city street address of well if located within city? 1 Lear Jet Way, Wichita					
2 WATER WELL OWNER:		Lear Jet, Inc. RR#, St. Address, Box # : 1 Lear Jet Way City, State, ZIP Code : Wichita, KS 67227 Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 52 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 33 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter 8.5 in. to 52 ft. and _____ in. to _____ ft. 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 7 Lawn and garden (domestic) 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 _____ No X			
		5 TYPE OF BLANK CASING USED:			
		1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded Flush			
		Blank casing diameter 2 in. to 32 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height above land surface Flushmount in., weight 0.703 lbs./ft. Wall thickness or gauge No. Sch. 40 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 32 ft. to 52 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 30 ft. to 52 ft. From _____ ft. to _____ ft.			
6 GROUT MATERIAL:		1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals From 1 ft. to 25 ft. From 25 ft. to 30 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 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage Direction from well? _____ How many feet? _____			
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/yr) 10-25-04 and this record is true to the best of my knowledge and belief. Kansas		Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 12-01-04 under the business name of Geotechnical Services, Inc. by (signature) <i>Allison M. [Signature]</i>			
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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