

## WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

| <b>1 LOCATION OF WATER WELL:</b><br>County: <u>SEDGWICK</u><br>Distance and direction from nearest town or city street address of well if located within city? <u>1/4 mi. E. of 119th</u><br><u>Within 1/8 mi. N. of Pawnee</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |      | Section Number <u>31</u><br>Township Number <u>T 21 S</u><br>Range Number <u>R 1 W E/W</u>                                                                                                                                                              |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>2 WATER WELL OWNER:</b> <u>STEVE BROWN</u><br>RR#, St. Address, Box # : <u>2553 S. MILSTEAD CT.</u><br>City, State, ZIP Code : <u>Wichita, KS 67209</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |      | <b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits)<br>Latitude: <u>NW 37.653096 - SE 37.650134</u><br>Longitude: <u>NW -97.47737 SE -97.47520</u><br>Elevation: _____<br>Datum: _____<br>Data Collection Method: <u>KS. ONE CALL</u> |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b><br>N<br><table border="1" style="width:100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 25%;">NW</td> <td style="width: 25%;">NE</td> <td style="width: 25%;">E</td> </tr> <tr> <td style="width: 25%;">SW</td> <td style="width: 25%;">SE</td> <td style="width: 25%;">S</td> </tr> </table> S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | NW   | NE                                                                                                                                                                                                                                                      | E              | SW | SE | S        | <b>4 DEPTH OF COMPLETED WELL</b> <u>120</u> ft.<br>Depth(s) Groundwater Encountered (1) <u>28</u> ft. (2) _____ ft. (3) _____ ft.<br>WELL'S STATIC WATER LEVEL <u>28</u> ft. below land surface measured on mo/day/yr. <u>10/13/15</u><br>Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm<br>Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm<br>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial <u>7 Domestic (lawn &amp; garden)</u> 10 Monitoring well<br>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr<br>Sample was submitted _____ Water well disinfected? Yes <u>X</u> No _____ |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | NE   | E                                                                                                                                                                                                                                                       |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SE   | S                                                                                                                                                                                                                                                       |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>5 TYPE OF CASING USED:</b><br>1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)<br><u>2 PVC</u> 4 ABS 7 Fiberglass<br>Blank casing diameter <u>5</u> in. to <u>120</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.<br>Casing height above land surface <u>16</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. _____<br><b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b><br>1 Steel 3 Stainless Steel 5 Fiberglass <u>7 PVC</u> 9 ABS 11 Other (Specify) _____<br>2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)<br><b>SCREEN OR PERFORATION OPENINGS ARE:</b><br>1 Continuous slot <u>3 Mill slot</u> 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)<br>2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____<br><b>SCREEN-PERFORATED INTERVALS:</b> From <u>30</u> ft. to <u>120</u> ft., From _____ ft. to _____ ft.<br>From _____ ft. to _____ ft., From _____ ft. to _____ ft.<br><b>GRAVEL PACK INTERVALS:</b> From <u>24</u> ft. to <u>120</u> ft., From _____ ft. to _____ ft.<br>From _____ ft. to _____ ft., From _____ ft. to _____ ft. |      |                                                                                                                                                                                                                                                         |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other _____<br>Grout Intervals: From <u>4</u> ft. to <u>24</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.<br>What is the nearest source of possible contamination:<br>1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify)<br>2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below<br><u>3 Watertight sewer lines</u> 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil wll/gas well<br>Direction from well? <u>South</u> How many feet? <u>16</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |                                                                                                                                                                                                                                                         |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">FROM</th> <th style="width: 10%;">TO</th> <th style="width: 80%;">LITHOLOGIC LOG</th> </tr> <tr> <td>0</td> <td>2</td> <td>TOP SOIL</td> </tr> <tr> <td>2</td> <td>28</td> <td>CLAY</td> </tr> <tr> <td>28</td> <td>41</td> <td>CLAY SAND</td> </tr> <tr> <td>41</td> <td>72</td> <td>CLAY</td> </tr> <tr> <td>72</td> <td>81</td> <td>FINE SAND</td> </tr> <tr> <td>81</td> <td>120</td> <td>MED SAND</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | FROM | TO                                                                                                                                                                                                                                                      | LITHOLOGIC LOG | 0  | 2  | TOP SOIL | 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 28 | CLAY | 28 | 41 | CLAY SAND | 41 | 72 | CLAY | 72 | 81 | FINE SAND | 81 | 120 | MED SAND | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">FROM</th> <th style="width: 10%;">TO</th> <th style="width: 80%;">PLUGGING INTERVALS</th> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> |  |  | FROM | TO | PLUGGING INTERVALS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TO   | LITHOLOGIC LOG                                                                                                                                                                                                                                          |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 28   | CLAY                                                                                                                                                                                                                                                    |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 28                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 41   | CLAY SAND                                                                                                                                                                                                                                               |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 41                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 72   | CLAY                                                                                                                                                                                                                                                    |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 72                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 81   | FINE SAND                                                                                                                                                                                                                                               |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 81                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 120  | MED SAND                                                                                                                                                                                                                                                |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TO   | PLUGGING INTERVALS                                                                                                                                                                                                                                      |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>10/13/15</u> and this record is true to the best of my knowledge and belief.<br>Kansas Water Well Contractor's License No. <u>6011</u> This Water Well Record was completed on (mo/day/year) <u>10/31/15</u><br>Under the business name of <u>Chase Drilling</u> by (signature) <u>B. Chase</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      |                                                                                                                                                                                                                                                         |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>INSTRUCTIONS:</b> Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |                                                                                                                                                                                                                                                         |                |    |    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |    |    |           |    |    |      |    |    |           |    |     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |      |    |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |