

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction <u>NE SW SE NE</u>	Section Number	Township Number	Range Number
County: <u>sedgwick</u>		<u>SW 1/4 SE 1/4 NW 1/4</u>	<u>2</u>	T <u>27s</u> S	R <u>1w</u> E/W
Distance and direction from nearest town or city street address of well if located within city? <u>2657 Bayside Circle</u>			Global Positioning System (decimal degrees, min. of 4 digits)		
2 WATER WELL OWNER: Treescapes RR#, St. Address, Box # : <u>1202 N Andover Rd</u> City, State, ZIP Code : <u>Andover, Ks 67002</u>			Latitude: _____		
			Longitude: _____		
			Elevation: _____		
			Datum: _____		
Data Collection Method: _____					

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>54</u> ft.			
		Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft.			
		WELL'S STATIC WATER LEVEL <u>13</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>40</u> 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 <u>7</u> Domestic (lawn & garden) 10 Monitoring well			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>x</u> ; If yes, mo/day/yr		Sample was submitted _____ Water Well Disinfected? Yes <u>x</u> No _____			

5 TYPE OF CASING USED:		5 Wrought Iron		8 Concrete tile		CASING JOINTS: Glued <u>x</u> Clamped _____	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below) _____	
<u>2</u> PVC		4 ABS		7 Fiberglass		Welded _____	
Blank casing diameter <u>5</u> in. to <u>44</u> ft., Dia		_____ in. to _____ ft., Dia		_____ in. to _____ ft., Dia		_____ in. to _____ ft.	
Casing height above land surface <u>12</u> in., Weight <u>2.40</u> lbs./ft.		Wall thickness or gauge No. <u>160psi</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass		<u>7</u> PVC	
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)	
9 ABS		11 Other (specify) _____					
10 Asbestos-Cement		12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot		<u>3</u> Mill slot		5 Guaze wrapped		7 Torch cut	
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut	
9 Drilled holes		11 None (open hole)					
10 Other (specify) _____							
SCREEN-PERFORATED INTERVALS:		From <u>44</u> ft. to <u>54</u> ft.		ft. From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From <u>13</u> ft. to <u>54</u> ft.		ft. From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft.		ft. From _____ ft. to _____ ft.			

6 GROUT MATERIAL:		1 Neat cement		2 Cement grout		<u>3</u> Bentonite		4 Other _____	
Grout Intervals		From <u>3</u> ft. to <u>20</u> 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage		14 Abandoned water well	
<u>3</u> Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage		15 Oil well/ gas well	
16 Other (specify below) _____									
Direction from well? <u>South east</u>		How many feet? <u>40</u>							

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil			
3	10	clay			
10	30	Fine sand			
30	54	Med 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) 9-18-07 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) 9-28-07 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>.

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