

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 SW ¼ SE ¼		12	T 27 S	R 1 (W)									
Distance and direction from nearest town or city street address of well if located within city? 3110 West 10th Street, Wichita, KS				Global Positioning System (decimal degrees, min. of 4 digits)											
2 WATER WELL OWNER: Jim Morgan's Fine Dry Cleaning				Latitude: _____											
RR#, St. Address, Box #: 3110 West 10th Street				Longitude: _____											
City, State, ZIP Code: Wichita, KS 67202				Elevation: _____											
				Datum: _____											
				Data Collection Method: _____											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>18'</u> ft.													
N <table border="1" style="width: 100px; height: 100px; border-collapse: collapse; margin: auto;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td></td><td>NE</td></tr> <tr><td>SW</td><td style="text-align: center;">X</td><td>SE</td></tr> </table> S					NW		NE	SW	X	SE	Depth(s) Groundwater Encountered 1 <u>N/A</u> ft. 2 _____ ft. 3 _____ ft.				
		NW		NE											
		SW	X	SE											
		WELL'S STATIC WATER LEVEL <u>N/A</u> ft. below land surface measured on mo/day/yr <u>N/A</u>													
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm															
Est. Yield _____ 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 7 Domestic (lawn & garden) 10 Monitoring well <u>Soil Vapor Extracting</u>															
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 _____ No <u>X</u>															
5 TYPE OF CASING USED:															
1 Steel		3 RMP (SR)		5 Wrought Iron		8 Concrete tile									
(2 PVC)		4 ABS		6 Asbestos-Cement		9 Other (specify below)									
		7 Fiberglass				CASING JOINTS: Glued _____ Clamped _____									
						Welded _____									
						Threaded <u>X</u>									
Blank casing diameter <u>4</u> in. to <u>8</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.															
Casing height below land surface <u>7.44</u> in., Weight _____ lbs./ft. Wall thickness or gauge No. <u>Sch. 40 PVC</u>															
TYPE OF SCREEN OR PERFORATION MATERIAL:															
1 Steel		3 Stainless steel		5 Fiberglass (7 PVC)		9 ABS									
2 Brass		4 Galvanized steel		6 Concrete tile		11 Other (specify)									
				8 RM (SR)		12 None used (open hole)									
						10 Asbestos-Cement									
SCREEN OR PERFORATION OPENINGS ARE:															
1 Continuous slot		(3 Mill slot)		5 Guaze wrapped		7 Torch cut									
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes									
						11 None (open hole)									
						8 Saw Cut									
						10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From <u>8</u> ft. to <u>18</u> ft. From _____ ft. to _____ ft.															
GRAVEL PACK INTERVALS: From <u>8</u> ft. to <u>18</u> 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 <u>1</u> ft. to <u>8</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									
2 Sewer lines		5 Cess pool		8 Sewage lagoon		13 Insecticide Storage									
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		16 Other (specify below)									
						<u>Dry Cleaning</u>									
						<u>Remediation Site</u>									
Direction from well? _____ How many feet? _____															
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS									
0	11'	Clay, silty													
11'	14'	Fine sands													
14'	16'	Fine sands - coarse gravels < 1½"													
16'	18'	Sand, fine, minor medium gravels & clays													
						SVE 3									
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) <u>03/19/2008</u> and this record is true to the best of my knowledge and belief.															
Kansas Water Well Contractor's License No. <u>594</u> . This Water Well Record was completed on (mo/day/year) <u>06/25/2008</u>															
under the business name of <u>Coranco Great Plains, Inc.</u> 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 .															

White Copy

KSA 82a-1212

Form provided by Forms-On-A-Disk, Inc. • Dallas, Texas • (214) 340-9429