

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		NW ¼ NE ¼ NE ¼		13	T 27 S	R 1 (W)												
Distance and direction from nearest town or city street address of well if located within city? 2838 W. 11th Street North, 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 10 th 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>30'</u> ft.																
N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px; text-align: center;">X</td> </tr> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> <td></td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> <td></td> </tr> </table> W E S				X	NW	NE					SW	SE		Depth(s) Groundwater Encountered 1 <u>~20'</u> ft. 2 _____ ft. 3 _____ ft.				
				X														
		NW	NE															
		SW	SE															
WELL'S STATIC WATER LEVEL <u>15.00</u> ft. below land surface measured on mo/day/yr 04/16/2008																		
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)																		
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 CASING USED:																		
1 Steel		3 RMP (SR)		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____												
(2 PVC)		4 ABS		9 Other (specify below)		Welded _____												
		7 Fiberglass				Threaded X												
Blank casing diameter <u>2</u> in. to <u>10</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																		
Casing height below land surface <u>4.56</u> in., Weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40 PVC																		
TYPE OF SCREEN OR PERFORATION MATERIAL:																		
1 Steel		3 Stainless steel		5 Fiberglass		(7 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		(3 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 _____		10		ft. to <u>30</u>		ft. From _____ ft. to _____ ft.												
From _____				ft. to _____		ft. From _____ ft. to _____ ft.												
GRAVEL PACK INTERVALS:		From _____		8		ft. to <u>30</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		11 Fuel storage												
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage												
						13 Insecticide Storage												
						14 Abandoned water well												
						15 Oil well/ gas well												
						16 Other (specify below)												
						Dry Cleaning Remediation Site												
Direction from well? _____ How many feet? _____																		
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS													
0	6"	Top soil																
6"	10"	Clay, silty																
10"	11'	Clay, minor sands																
11'	18'	Fine sands, medium gravels																
18'	20'	Fine sands with minor to medium to coarse gravels				MW 5												
20'	30'	Medium sands to medium gravels, minor clays																
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>03/20/2008</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 .																		

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