

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

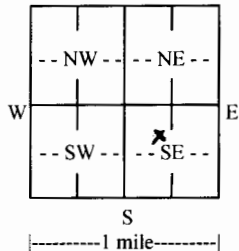
Division of Water  
Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: Sedgwick Fraction: 1/4 SE 1/4 NW 1/4 SE 1/4 Section Number: 8 Township Number: T 27 S Range Number: R 1 E ☒ W

2 WELL OWNER: Last Name: Jurkuna First: Kenny Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☒  
Business: 1655 N Byron Rd  
Address: Wichita State: Ks ZIP:

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 80 ft.  
Depth(s) Groundwater Encountered: 1) ..... ft.  
2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well  
WELL'S STATIC WATER LEVEL: 26 ft.  
☐ below land surface, measured on (mo-day-yr) .....  
☐ above land surface, measured on (mo-day-yr) .....  
Pump test data: Well water was ..... ft.  
after ..... hours pumping ..... gpm  
Well water was ..... ft.  
after ..... hours pumping ..... gpm  
Estimated Yield: ..... gpm  
Bore Hole Diameter: 12 in. to ..... ft. and  
..... in. to ..... ft.

5 Latitude: ..... (decimal degrees)  
Longitude: ..... (decimal degrees)  
Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27  
Source for Latitude/Longitude:  
☐ GPS (unit make/model: .....)  
(WAAS enabled? ☐ Yes ☐ No)  
☐ Land Survey ☐ Topographic Map  
☐ Online Mapper: .....

6 Elevation: ..... ft. ☐ Ground Level ☐ TOC  
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map  
☐ Other .....

## 7 WELL WATER TO BE USED AS:

1. Domestic: ☐ Household ☒ Lawn & Garden ☐ Livestock  
2. ☐ Irrigation  
3. ☐ Feedlot  
4. ☐ Industrial  
5. ☐ Public Water Supply: well ID .....  
6. ☐ Dewatering: how many wells? .....  
7. ☐ Aquifer Recharge: well ID .....  
8. ☐ Monitoring: well ID .....  
9. Environmental Remediation: well ID .....  
☐ Air Sparge ☐ Soil Vapor Extraction  
☐ Recovery ☐ Injection  
10. ☐ Oil Field Water Supply: lease .....  
11. Test Hole: well ID .....  
☐ Cased ☐ Uncased ☐ Geotechnical  
12. Geothermal: how many bores? .....  
a) Closed Loop ☐ Horizontal ☐ Vertical  
b) Open Loop ☐ Surface Discharge ☐ Inj. of Water  
13. ☐ Other (specify): .....

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted: .....  
Water well disinfected? ☒ Yes ☐ No

8 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other ..... CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded  
Casing diameter 5 in. to 30 in. Diameter 16 in. to ..... ft. Diameter ..... in. to ..... ft.  
Casing height above land surface 16 in. Weight 160 lbs./ft. Wall thickness or gauge No. 26

## TYPE OF SCREEN OR PERFORATION MATERIAL:

- ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☒ PVC ☐ Other (Specify) .....  
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)

## SCREEN OR PERFORATION OPENINGS ARE:

- ☐ Continuous Slot ☒ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) .....  
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)

SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....  
Grout Intervals: From 4 ft. to 24 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

## Nearest source of possible contamination:

- ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage  
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well  
☒ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well  
☐ Other (Specify) .....

Direction from well? North Distance from well? 70' ft.

| 10 FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---------|----|----------------|------|----|------------------------------------------|
| 0       | 2  | Top Soil       |      |    |                                          |
| 2       | 24 | Clay           |      |    |                                          |
| 24      | 37 | fine Sand      |      |    |                                          |
| 37      | 49 | Med Sand       |      |    |                                          |
| 49      | 53 | Clay           |      |    |                                          |
| 53      | 80 | Med Sand       |      |    |                                          |

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-yr) 10/31/12 and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. 1011 This Water Well Record was completed on (mo-day-yr) 11/29/12  
under the business name of Chas. S. Drilling

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

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