

WATER WELL RECORD Form WWC-5 SE SE SW NE		Division of Water Resources App. No. 		Well ID 	
☒ Original Record ☐ Correction ☐ Change in Well Use					
1 LOCATION OF WATER WELL: County: <u>Sedgewick</u>		Fraction: <u>SE 1/4 NE 1/4 NW 1/4</u>		Section Number: <u>7</u>	
Township Number: <u>T 27 S</u>		Range Number: <u>R 1 E W</u>			
2 WELL OWNER: Last Name: <u>Meferland</u> Business: _____ Address: <u>10801 W Westport</u> Address: _____ City: <u>Wichita</u> State: <u>Ks</u> ZIP: <u>67212</u>		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: ☐ <u>10801 W Westport</u>			
3 LOCATE WELL WITH "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL: <u>5.5</u> ft. Depth(s) Groundwater Encountered: 1) <u>3.2</u> ft. 2) _____ ft. 3) _____ ft., or 4) ☐ Dry Well WELL'S STATIC WATER LEVEL: _____ ft. ☒ below land surface, measured on (mo-day-yr) <u>5-7-13</u> ☐ 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: <u>9</u> in. to <u>32</u> in. to _____ in. to _____ in. to _____ in. to _____ in.		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 <u>5</u> in. to _____ in. Diameter _____ in. to _____ in. ft. Diameter _____ in. to _____ in. ft. Casing height above land surface <u>12</u> in. Weight _____ lbs./ft. Wall thickness or gauge No. <u>160</u> 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 <u>4.5</u> ft. to <u>5.5</u> ft. 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. From _____ ft. to _____ ft.					
9 GROUT MATERIAL: ☐ Neat cement ☒ Cement grout ☐ Bentonite ☐ Other _____ Grout Intervals: From <u>0</u> ft. to <u>20</u> ft. From _____ ft. to _____ 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? <u>East</u> Distance from well? <u>12</u> ft.					
10 FROM TO <u>11</u> <u>11</u> <u>11</u> <u>34</u> <u>34</u> <u>55</u>		LITHOLOGIC LOG <u>Top Soil</u> <u>Fine Tan Sand</u> <u>Coarse Tan Sand</u>		FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 	
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) <u>5-7-13</u> and this record is true to the best of my knowledge and belief Kansas Water Well Contractor's License No. <u>473</u> This Water Well Report was completed on (mo-day-yr) <u>5-7-13</u> under the business name of <u>Beardon Pump & Well</u>					
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 Revised 9/10/2012					