

Sta to

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County: Sedgwick Fraction: SE 1/4 SE 1/4 NW 1/4 NE 1/4 Section Number: 31 Township Number: T 27 S Range Number: R 1 E W

2 WELL OWNER: Last Name: Jones First: Robert 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 Address: 10814 W Can Ave
 City: Wichita State: Ka ZIP: 67209

3 LOCATE WELL WITH "X" IN SECTION BOX:

N	
NW	X NE
SW	SE
S	

W E

1 mile

4 DEPTH OF COMPLETED WELL: 120 ft.
 Depth(s) Groundwater Encountered: 1) 33 ft.
 2) _____ ft. 3) _____ ft. or 4) Dry Well
 WELL'S STATIC WATER LEVEL: 33 ft.
 below land surface, measured on (no-day-yr)
 above land surface, measured on (no-day-yr) 10/9/15
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Well water was _____ ft. after _____ hours pumping _____ gpm
 Estimated Yield: 25 gpm
 Bore Hole Diameter: 1 1/2 in. to 120 ft. and _____ in. to _____ ft.

5 Latitude: 37.6611715 (decimal degrees)
 Longitude: 97.46767229 (decimal degrees)
 Horizontal 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: <input type="checkbox"/> Household <input checked="" type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input type="checkbox"/> Monitoring: well ID _____ 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparging <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection
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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 120 ft. Diameter _____ in. to _____ ft. Diameter _____ in. to _____ ft.
 Casing height above land surface: 12 in. Weight 11.2 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 Gauge Wrapped Torch Cut Drilled Holes Other (Specify) _____
 Louvered Slitter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 100 ft. to 120 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 24 ft. to 120 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Interval: 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? 55' ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Topsoil			
2	33	Clay			
33	72	fine sand			
72	90	bdly			
90	120	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 (no-day-year) 10/9/15 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (no-day-year) 11/5/15
 under the business name of Chase Wellman Signature _____