

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

Well ID **RMW-7R**

<b>1 LOCATION OF WATER WELL:</b> County: <b>Sedgwick</b>	Fraction NW ¼ NE ¼ NW ¼ NW ¼	Section Number <b>13</b>	Township Number <b>T 27 S</b>	Range Number <b>R 1 E W</b>
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<b>2 WELL OWNER:</b> Last Name: <b>BP Products North America</b> Business: <b>BP Products North America</b> Address: <b>28100 Torch Parkway</b> Address: City: <b>Warrenville</b> State: <b>IL</b> ZIP: <b>60555</b>	First: 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: <input type="checkbox"/> <b>QuikTrip #0360R (Former Amoco #7402)</b> <b>3933 West 13th Street</b>
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<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N W E S 1 mile	<b>4 DEPTH OF COMPLETED WELL:</b> ..... 25 ..... ft. Depth(s) Groundwater Encountered: 1) ..... 20 ..... ft. 2) ..... N/A ..... ft. 3) ..... N/A ..... ft. or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ..... 16.5 ..... ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) ..... <input type="checkbox"/> above land surface, measured on (mo-day-yr) ..... Pump test data: Well water was ..... N/A ..... ft. after ..... N/A ..... hours pumping ..... N/A ..... gpm Well water was ..... N/A ..... ft. after ..... N/A ..... hours pumping ..... N/A ..... gpm Estimated Yield: ..... N/A ..... gpm Bore Hole Diameter: 8.25 in. to 25 ft. and ..... N/A ..... in. to ..... N/A ..... ft.	<b>5 Latitude:</b> ..... 37.70814 ..... (decimal degrees) <b>Longitude:</b> ..... 97.38949 ..... (decimal degrees) <b>Horizontal Datum:</b> <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <input type="checkbox"/> GPS (unit make/model: .....) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input checked="" type="checkbox"/> Land Survey <input checked="" type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....
<b>6 Elevation:</b> ..... ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC <b>Source:</b> <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input checked="" type="checkbox"/> Topographic Map <input type="checkbox"/> Other .....		

<b>7 WELL WATER TO BE USED AS:</b>		
1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	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 checked="" type="checkbox"/> Monitoring: well ID <b>RMW-7R</b> 9. Environmental Remediation: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease ..... 11. Test Hole: well ID ..... <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? ..... a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): .....
2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	

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 ..... 2 ..... in. to ..... 15 ..... ft., Diameter ..... N/A ..... in. to ..... N/A ..... ft., Diameter ..... N/A ..... in. to ..... N/A ..... ft.  
Casing height above land surface ..... 0 ..... in. Weight ..... N/A ..... lbs./ft. Wall thickness or gauge No. **Sch. 40** .....

**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 15 ft. to 25 ft., From N/A ft. to N/A ft., From N/A ft. to N/A ft.  
**GRAVEL PACK INTERVALS:** From 13 ft. to 25 ft., From N/A ft. to N/A ft., From N/A ft. to N/A ft.

**9 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other **Concrete 0 to 2 feet** .....  
Grout Intervals: From 2 ft. to 13 ft., From N/A ft. to N/A ft., From N/A ft. to N/A 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? **Northeast** Distance from well? **~175** ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	ML: md stiff, moist, brn, low plastic, SILT			
3	7	SM: loose, moist, orange, silty, f. SAND			
7	8	CL: md stiff, moist, orn/gy, plastic, CLAY			
8	10	ML: md stiff, moist, orn/gy, sandy SILT			
10	10.5	SM: loose, moist, oragne, silty, f. SAND			
10.5	16.5	SP: loose, moist, tan, f-m SAND			
16.5	25	SP: loose, wet, grey, m-c SAND, with silt			
					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-year) **7-19-2016** ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **759** ..... This Water Well Record was completed on (mo-day-year) **8-10-2016** ..... under the business name of **RAZEK Environmental, LLC** ..... Signature *[Signature]*