

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources; App. No. [REDACTED]

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| <b>1 LOCATION OF WATER WELL:</b><br>County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |          | Fraction<br><u>NE 1/4 SE 1/4 NE 1/4</u> | Section Number<br><u>23</u>                                                                                                                                                       | Township Number<br>T <u>27 S</u> | Range Number<br>R <u>2 E</u> <u>W</u> |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>13643 Highland Springs Ct.</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |          |                                         | <b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits)<br>Latitude: _____<br>Longitude: _____<br>Elevation: _____<br>Datum: _____<br>Data Collection Method: _____ |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| <b>2 WATER WELL OWNER:</b><br>RR#, St. Address, Box # : <u>13643 Highland Spgs Ct.</u><br>City, State, ZIP Code : <u>Wichita, KS</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |          |                                         |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b><br>N<br><div style="display: flex; align-items: center; justify-content: center;"> <div style="margin-right: 10px;">W</div> <table border="1" style="border-collapse: collapse; text-align: center;"> <tr> <td>-- NW --</td> <td>-- NE --</td> </tr> <tr> <td style="height: 40px;"></td> <td style="height: 40px;"></td> </tr> <tr> <td>-- SW --</td> <td>-- SE --</td> </tr> </table> <div style="margin-left: 10px;">E</div> </div><br>S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |          | -- NW --                                | -- NE --                                                                                                                                                                          |                                  |                                       | -- SW -- | -- SE -- | <b>4 DEPTH OF COMPLETED WELL</b> ..... <u>90</u> ..... ft.<br>Depth(s) Groundwater Encountered (1) <u>25</u> ..... ft. (2) ..... ft. (3) ..... ft.<br>WELL'S STATIC WATER LEVEL ..... <u>25</u> ..... ft. below land surface measured on mo/day/yr. <u>7:10:01</u><br>Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm<br>Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm<br><b>WELL WATER TO BE USED AS:</b> 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial 7 <u>Domestic (lawn &amp; garden)</u> 10 Monitoring well .....<br>Was a chemical/bacteriological sample submitted to Department? Yes ..... No <u>X</u> .....; If yes, mo/day/yr<br>Sample was submitted ..... Water well disinfected? Yes ..... No ..... |  |  |  |
| -- NW --                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | -- NE -- |                                         |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
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| -- SW --                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | -- SE -- |                                         |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| <b>5 TYPE OF CASING USED:</b><br>1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> ..... Clamped .....<br>2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....<br>7 Fiberglass ..... Threaded .....<br>Blank casing diameter ..... <u>5</u> ..... in. to ..... <u>25</u> ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.<br>Casing height above land surface ..... <u>16</u> ..... in., weight ..... <u>16.0</u> ..... lbs./ft. Wall thickness or gauge No. ..... <u>26</u> .....<br><b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b><br>1 Steel 3 Stainless Steel 5 Fiberglass 7 <u>PVC</u> 9 ABS 11 Other (Specify) .....<br>2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)<br><b>SCREEN OR PERFORATION OPENINGS ARE:</b><br>1 Continuous slot 3 <u>Mill slot</u> 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)<br>2 Louvered shutter 4 <u>Key punched</u> 6 Wire wrapped 8 Saw Cut 10 Other (specify) .....<br><b>SCREEN-PERFORATED INTERVALS:</b> From ..... <u>10</u> ..... ft. to ..... <u>90</u> ..... ft., From ..... ft. to ..... ft.<br>From ..... ft. to ..... ft., From ..... ft. to ..... ft.<br><b>GRAVEL PACK INTERVALS:</b> From ..... <u>24</u> ..... ft. to ..... <u>90</u> ..... ft., From ..... ft. to ..... ft.<br>From ..... ft. to ..... ft., From ..... ft. to ..... ft. |          |                                         |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| <b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other .....<br>Grout Intervals: From ..... <u>1</u> ..... ft. to ..... <u>24</u> ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.<br>What is the nearest source of possible contamination:<br>1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)<br>2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well<br>3 <u>Watertight sewer lines</u> 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil wll/gas well<br>Direction from well? <u>North</u> How many feet? <u>20</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                         |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| FROM TO LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |          | FROM TO PLUGGING INTERVALS              |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
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| 25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 30       | fine sand                               |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 42       | med sand                                |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| 42                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 61       | clay                                    |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| 61                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 75       | fine med sand                           |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| 75                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 90       | med sand                                |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) <u>constructed</u> (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>7:10:01</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>cell</u> This Water Well Recorded was completed on (mo/day/year) <u>7:5:05</u> Under the business name of <u>Chase Drilling</u> by (signature) <u>R Chase</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |          |                                         |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |          |                                         |                                                                                                                                                                                   |                                  |                                       |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |