

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u> Fraction <u>SW 1/4 NW 1/4 SE 1/4</u> Distance and direction from nearest town or city street address of well if located within city? Global Positioning Systems (decimal degrees, min. of 4 digits)	Section Number <u>26</u> Township Number <u>T 66 S 27</u> Range Number <u>R 2 E W</u>	Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____
---	---	--

2 WATER WELL OWNER: <u>Kurt Geis</u> RR#, St. Address, Box # : <u>14123 onewood Ct</u> City, State, ZIP Code : <u>Wichita KS 67235</u>	3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 25px; text-align: center;">W</td> <td style="width: 25px; text-align: center;">NW</td> <td style="width: 25px; text-align: center;">NE</td> <td style="width: 25px; text-align: center;">E</td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">X</td> <td style="text-align: center;">SE</td> <td></td> </tr> <tr> <td style="text-align: center;">S</td> <td></td> <td></td> <td></td> </tr> </table>	W	NW	NE	E	SW	X	SE		S			
W	NW	NE	E										
SW	X	SE											
S													

4 DEPTH OF COMPLETED WELL 11.8 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL..... 31 ft. below land surface measured on mo/day/yr.....

Pump test data: Well water was..... ft. after..... hours pumping..... gpm

Est. Yield..... gpm: Well water was..... ft. after..... hours pumping..... gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No ☒; If yes, mo/day/yr

Sample was submitted..... Water well disinfected? Yes ☒ No

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued ☒ Clamped.....
2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded.....
		7 Fiberglass		Threaded.....

Blank casing diameter 5 in. to 11.8 ft., Diameter 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:

1 Steel	3 Stainless Steel	5 Fiberglass	7 <u>PVC</u>	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 <u>Mill slot</u>	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 <u>Key punched</u>	6 Wire wrapped	8 Saw Cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From..... 7.8 ft. to 11.8 ft., From ft. to ft.

GRAVEL PACK INTERVALS: From..... 2.5 ft. to 11.8 ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From..... 4 ft. to 2.4 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 <u>Watertight sewer lines</u>	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	

Direction from well? North How many feet? 55

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	TOP Soil			
2	12	Brown Clay			
12	31	blue shale			
31	48	grey shale			
48	51	Red shale			
51	78	blue shale			
78	81	Red shale			
81	118	blue shale & Gas			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/27/06 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 1211 This Water Well Record was completed on (mo/day/year) 12/26/06 under the business name of Chase Drilling by (signature) O. Chase

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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. Visit us at <http://www.kdheks.gov/waterwell/index.html>.