

# WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. \_\_\_\_\_

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------|
| <b>1 LOCATION OF WATER WELL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                 |    | Fraction                                                                                                                                                                                                                                                       | Section Number                                                                                                                                                                   | Township Number | Range Number       |
| County: <b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | <b>ne ¼ ne ¼ nw ¼</b>                                                                                                                                                                                                                                          | <b>25</b>                                                                                                                                                                        | T <b>27s</b> S  | R <b>2w</b> E/W    |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>362 S Limuel Ct</b>                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                                                                                                                                                                                | <b>Global Positioning System</b> (decimal degrees, min. of 4 digits)<br>Latitude: _____<br>Longitude: _____<br>Elevation: _____<br>Datum: _____<br>Data Collection Method: _____ |                 |                    |
| <b>2 WATER WELL OWNER: Dale Smith</b><br>RR#, St. Address, Box # : <b>362 S Limuel Ct</b><br>City, State, ZIP Code : <b>Wichita, Ks 67235</b>                                                                                                                                                                                                                                                                                                                    |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>                                                                                                                                                                                                                                                                                                                                                                                                      |    | <b>4 DEPTH OF COMPLETED WELL 75 ft.</b>                                                                                                                                                                                                                        |                                                                                                                                                                                  |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.                                                                                                                                                                                           |                                                                                                                                                                                  |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | WELL'S STATIC WATER LEVEL <b>28</b> ft. below land surface measured on mo/day/yr _____                                                                                                                                                                         |                                                                                                                                                                                  |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm                                                                                                                                                                                   |                                                                                                                                                                                  |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Est. Yield <b>20</b> 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<br>1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial <b>7</b> Domestic (lawn & garden) 10 Monitoring well |                                                                                                                                                                                  |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>x</b> ; If yes, mo/day/yr _____<br>Sample was submitted _____ Water Well Disinfected? Yes <b>x</b> No _____                                                                     |                                                                                                                                                                                  |                 |                    |
| <b>5 TYPE OF CASING USED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | <b>5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued x Clamped</b>                                                                                                                                                                                           |                                                                                                                                                                                  |                 |                    |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded                                                                                                                                                                                                                                                                                                                                                                                              |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| <b>2</b> PVC 4 ABS 7 Fiberglass Threaded                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| Blank casing diameter _____ in. to <b>65</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| Casing height above land surface <b>12</b> in., Weight <b>2.40</b> lbs./ft. Wall thickness or gauge No. <b>160psi</b>                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                          |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| 1 Steel 3 Stainless steel 5 Fiberglass <b>7</b> PVC 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 <b>3</b> Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)                                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)                                                                                                                                                                                                                                                                                                                                                                                     |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| SCREEN-PERFORATED INTERVALS: From <b>65</b> ft. to <b>75</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                     |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| GRAVEL PACK INTERVALS: From <b>28</b> ft. to <b>75</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <b>3</b> Bentonite 4 Other                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| Grout Intervals From <b>3</b> ft. to <b>28</b> 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 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well                                                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| Direction from well? <b>South East</b> How many feet? <b>12ft</b>                                                                                                                                                                                                                                                                                                                                                                                                |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                             | TO | LITHOLOGIC LOG                                                                                                                                                                                                                                                 | FROM                                                                                                                                                                             | TO              | PLUGGING INTERVALS |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1  | Top soil                                                                                                                                                                                                                                                       |                                                                                                                                                                                  |                 |                    |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 21 | Clay                                                                                                                                                                                                                                                           |                                                                                                                                                                                  |                 |                    |
| 21                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 26 | Fine sand                                                                                                                                                                                                                                                      |                                                                                                                                                                                  |                 |                    |
| 26                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 37 | Med Sand                                                                                                                                                                                                                                                       |                                                                                                                                                                                  |                 |                    |
| 37                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 57 | Clay                                                                                                                                                                                                                                                           |                                                                                                                                                                                  |                 |                    |
| 57                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 65 | Fine Sand                                                                                                                                                                                                                                                      |                                                                                                                                                                                  |                 |                    |
| 65                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 69 | Med gravel                                                                                                                                                                                                                                                     |                                                                                                                                                                                  |                 |                    |
| 69                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 75 | Shale                                                                                                                                                                                                                                                          |                                                                                                                                                                                  |                 |                    |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <b>(1)</b> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>7-1-09</b> and this record is true to the best of my knowledge and belief.                                                                                                                                                                                         |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| Kansas Water Well Contractor's License No. <b>740</b> This Water Well Record was completed on (mo/day/year) <b>7-15-09</b>                                                                                                                                                                                                                                                                                                                                       |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| under the business name of <b>Weninger Drilling Inc.</b> by (signature) _____                                                                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |
| INSTRUCTIONS: Please fill in blanks 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 <a href="http://www.kdheks.gov/waterwell">http://www.kdheks.gov/waterwell</a> . |    |                                                                                                                                                                                                                                                                |                                                                                                                                                                                  |                 |                    |

White Copy

KSA 82a-1212

Form provided by Forms-On-A-Disk, Inc. • Dallas, Texas • (214) 340-9429