

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: SEDGWICK Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ . 2341 LEO ST GODDARD, KS 67052	Fraction SE ¼ SW ¼ SW ¼ ¼	Section Number 33	Township No. T 27 S	Range Number R 2 ☐ E ☒ W
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Global Positioning System (GPS) information:
 Latitude: (in decimal degrees)
 Longitude: (in decimal degrees)
 Elevation:
 Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
 Collection Method:
☐ GPS unit (Make/Model:)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
 Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: BRANDON WALTNER RR#, Street Address, Box #: 2341 LEO ST City, State, ZIP Code : GODDARD, KS 67052	3 LOCATE WELL WITH AN "X" IN SECTION BOX:
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4 DEPTH OF COMPLETED WELL 90 ft. Depth(s) Groundwater Encountered (1) 20 ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr. 9/8/09 Pump test data: Well water was ft. after hours pumping gpm EST. YIELD 25 gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter in. to ft., and in. to ft. WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☒ Domestic-lawn & garden ☐ 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: ☐ Steel ☒ PVC ☐ Other CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter .5 in. to .30 ft., Diameter in. to ft. Casing height above land surface 12 in., Weight 2.5 lbs./ft., Wall thickness or gauge No. SDR26 TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☒ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☒ Saw cut ☐ Other (specify) SCREEN-PERFORATED INTERVALS: From .30 ft. to .90 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 20 ft. to 90 ft., From ft. to ft. From ft. to ft., From ft. to ft.
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6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other Grout Intervals: From .3 ft. to 20 ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☒ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well Direction from well SOUTHEAST Distance from well 50 FT.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>20</td> <td>CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20</td> <td>30</td> <td>FINE TO MED SAND</td> <td></td> <td></td> <td></td> </tr> <tr> <td>30</td> <td>90</td> <td>GREY SHALE</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	20	CLAY				20	30	FINE TO MED SAND				30	90	GREY SHALE																																													
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) **9/8/09** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **238** This Water Well Record was completed on (mo/day/year) **9/8/09**
 under the business name of **PREMIER PUMP & WELL SERVICE, INC.** by (signature) *Chelsea R. Crueh*
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.