

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number
County: Sedgwick		ne ¼ ne ¼ se ¼		36	T 27S S	R 2W E/W
Distance and direction from nearest town or city street address of well if located within city? 12141 W Jewell Wichita, Ks.				Global Positioning System (decimal degrees, min. of 4 digits)		
2 WATER WELL OWNER: Cody Smith RR#, St. Address, Box # : 12141 W Jewell City, State, ZIP Code : Wichita, Ks.				Latitude: _____		
				Longitude: _____		
				Elevation: _____		
				Datum: _____		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF COMPLETED WELL <u>110</u> ft.		
				Depth(s) Groundwater Encountered 1 <u>38</u> ft. 2 <u>84</u> ft. 3 _____ ft.		
				WELL'S STATIC WATER LEVEL <u>38</u> ft. below land surface measured on mo/day/yr <u>4/2/10</u>		
				Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm		
				Est. Yield <u>30</u> 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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)		
				2 Irrigation 4 Industrial X Domestic (lawn & garden) 10 Monitoring well		
				Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yr		
				Sample was submitted _____ Water Well Disinfected? Yes X No _____		
5 TYPE OF CASING USED:						
1 Steel		3 RMP (SR)		5 Wrought Iron		8 Concrete tile
X 2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
		7 Fiberglass				CASING JOINTS: Glued X Clamped _____
Blank casing diameter <u>5</u> in. to <u>90</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface <u>12</u> in., Weight <u>2.4</u> lbs./ft. Wall thickness or gauge No. <u>160 psi</u>						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		X 6 PVC
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)
		5 Guaze wrapped		7 Torch cut		9 ABS
SCREEN OR PERFORATION OPENINGS ARE:		1 Continuous slot X Mill slot		5 Guaze wrapped		7 Torch cut
		2 Louvered shutter		4 Key punched		6 Wire wrapped
		3 Mill slot		5 Guaze wrapped		7 Torch cut
		4 Key punched		6 Wire wrapped		8 Saw Cut
		5 Guaze wrapped		7 Torch cut		9 Drilled holes
		6 Wire wrapped		8 Saw Cut		10 Other (specify)
		7 Torch cut		9 Drilled holes		11 None (open hole)
		8 Saw Cut		10 Other (specify)		
SCREEN-PERFORATED INTERVALS: From <u>90</u> ft. to <u>110</u> ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>40</u> ft. to <u>110</u> ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout X 3 Bentonite 4 Other _____						
Grout Intervals From <u>0</u> ft. to <u>40</u> 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
X 3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
		7 Pit privy		10 Livestock pens		13 Insecticide Storage
		8 Sewage lagoon		11 Fuel storage		14 Abandoned water well
		9 Feedyard		12 Fertilizer storage		15 Oil well/ gas well
Direction from well? South		How many feet? <u>15</u>				
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
<u>0</u>	<u>3</u>	Topsoil				
<u>3</u>	<u>38</u>	Brown Clay				
<u>38</u>	<u>41</u>	Fine Sand				
<u>41</u>	<u>84</u>	Blue Clay				
<u>84</u>	<u>110</u>	Fine - Med sand				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (X) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4/2/10</u> and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. <u>740</u> . This Water Well Record was completed on (mo/day/year) <u>5/2/10</u>						
under the business name of Weninger Drilling Inc 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 785-296-8522. 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 .						

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