

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

Well ID

Original Record Correction Change in Well

1 LOCATION OF WATER WELL: Use Fraction Section Number Township Number Range Number

County: **Sedgwick** **SE** $\frac{1}{4}$ **NE** $\frac{1}{4}$ **SW** $\frac{1}{4}$ **SE** $\frac{1}{4}$ **22** **T 27 S** **R 2** **E** **W**

2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:

Business: **SHARP, CRAIG HOMES INC.** Address: **2123 N. Collective Ln. Ste. A** City: **Wichita** State: **Kansas** ZIP: **67206** **183 S. Ciderbluff Ct. Wichita, Kansas 67052**

3 LOCATE WELL WITH "X" IN SECTION BOX:

N

-- NW --		-- NE --
-- SW --		-- SE --

S

|-----1 mile-----|

4 DEPTH OF COMPLETED WELL: **85**..... ft.

Depth(s) Groundwater Encountered: 1) ft.
2) ft. 3) ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: **20**..... ft.

below land surface, measured on (mo-day-yr) **02/14/22**.

above land surface, measured on (mo-day-yr).....

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

Well water was ft. after..... hours pumping gpm

Estimated Yield:gpm

Bore Hole Diameter: **12**..... in. to **85**..... ft. and in. to ft.

5 Latitude: **37.68111**.....(decimal degrees)

Longitude: **-97.52321**.....(decimal degrees)

Horizontal Datum: WGS 84 NAD 83 NAD 27

Source for Latitude/Longitude:

GPS (unit make/model: **iPhone**.....)

(WAAS enabled? Yes No)

Land Survey Topographic Map

Online Mapper:

6 Elevation:ft. Ground Level TOC

Source: Land Survey GPS Topographic Map Other

7 WELL WATER TO BE USED AS:

1. Domestic:	5. <input type="checkbox"/> Public Water Supply: well ID	10. <input type="checkbox"/> Oil Field Water Supply: lease
<input type="checkbox"/> Household	6. <input type="checkbox"/> Dewatering: how many wells?	11. Test Hole: well ID
<input checked="" type="checkbox"/> Lawn & Garden	7. <input type="checkbox"/> Aquifer Recharge: well ID	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
<input type="checkbox"/> Livestock	8. <input type="checkbox"/> Monitoring: well ID	12. Geothermal: how many bores?
2. <input type="checkbox"/> Irrigation	9. Environmental Remediation: well ID	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
3. <input type="checkbox"/> Feedlot	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
4. <input type="checkbox"/> Industrial	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:

Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter **5**..... in. to **85**..... ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface **12**..... in. Weight **2.35**..... lbs./ft. Wall thickness or gauge No. **SDR-26**.....

TYPE OF SCREEN OR PERFORATION MATERIAL:

Steel Stainless Steel Fiberglass PVC Other (Specify)

Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)

Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From **40**..... ft. to **85**..... ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **24**..... ft. to **85**..... ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From **4**..... ft. to **24**..... ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input checked="" type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify)				

Direction from well? **West**..... Distance from well? **14 ft. plus**..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	topsoil			
3	28	clay			
28	45	medium sand			
45	85	gray shale			
Notes:					

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) **02/14/2022**, and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **236**..... This Water Well Record was completed on (mo-day-year) **2/16/2022**..... under the business name of **Harp Well and Pump Service**..... Signature **Todd S. Harp**.....