State

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. _____ Well ID _____

☑ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County: Edgwick	Fraction: SE ¼ SW ¼ NW ¼ SE ¼	Section Number: 10	Township Number: T 28 S	Range Number: R 1 ☐E ☒W

2 WELL OWNER: Last Name: Brickman First: Adam
Business:
Address: 6281 W. Juno ave
Address:
City: Wichita State: Ks ZIP: 67215

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: ☒

3 LOCATE WELL WITH "X" IN SECTION BOX: N / NW / NE / W / E / SW / SE (X) / S — 1 mile

4 DEPTH OF COMPLETED WELL: 60 ft.
Depth(s) Groundwater Encountered: 1) 23 ft. 2) ____ ft. 3) ____ ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 23 ft.
☐ below land surface, measured on (mo-day-yr) _____
☒ above land surface, measured on (mo-day-yr) 10/30/15
Pump test data: Well water was ____ ft. after ____ hours pumping ____ gpm
Well water was ____ ft. after ____ hours pumping ____ gpm
Estimated Yield: 25 gpm
Bore Hole Diameter: 12 in. to 60 ft. and ____ in. to ____ ft.

5 Latitude: 37.626145 (decimal degrees)
Longitude: 97.414920555 (decimal degrees)
Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
☐ GPS (unit make/model: _____)
(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: ☐ Household ☒ Lawn & Garden ☐ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID _____
6. ☐ Dewatering: how many wells? _____
7. ☐ Aquifer Recharge: well ID _____
8. ☐ Monitoring: well ID _____
9. Environmental Remediation: well ID _____ ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease _____
11. Test Hole: well ID _____ ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? _____ a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ 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 60 ft., Diameter ____ in. to ____ ft., Diameter ____ in. to ____ ft.
Casing height above land surface 12 in. Weight 16.2 lbs/ft. Wall thickness or gauge No. 2.60

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 60 ft., From ____ ft. to ____ ft., From ____ ft. to ____ ft.
GRAVEL PACK INTERVALS: From 24 ft. to 60 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:
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☒ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☐ Other (Specify) _____
Direction from well? East Distance from well? 22 ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	topsoil			
2	22	Clay			
22	41	Silty Sand			
41	60	Medium to Coarse Sand			

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) 10/30/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 60 This Water Well Record was completed on (mo-day-year) 11/30/15 under the business name of Chase Drilling Signature _____

Mail 1 white copy along with a fee of $5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.

Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015