

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		NW ¼	SE ¼	8	T 28 S	R 4 E/W
Distance and direction from nearest town or city street address of well if located within city?				Global Positioning System (decimal degrees, min. of 4 digits)		
2 WATER WELL OWNER: John and Rose Wright RR#, St. Address, Box # : 211 N. Adams City, State, ZIP Code : Cheney, KS 67701				Latitude: _____		
				Longitude: _____		
				Elevation: _____		
				Datum: _____		
				Data Collection Method: _____		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 80 ft.	
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.	
		WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr	
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm	
		Est. Yield 30 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 7 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:		5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued x Clamped	
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) _____
2 PVC	4 ABS	7 Fiberglass	_____ Welded _____
Blank casing diameter 5 in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Threaded _____	
Casing height above land surface 12 in., Weight 2.40 lbs./ft. Wall thickness or gauge No. 160psi			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	7 PVC
2 Brass	4 Galvanized steel	6 Concrete tile	8 RM (SR)
SCREEN OR PERFORATION OPENINGS ARE:		9 ABS 11 Other (specify) _____	
1 Continuous slot	3 Mill slot	5 Guaze wrapped	7 Torch cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut
SCREEN-PERFORATED INTERVALS:		9 Drilled holes 11 None (open hole)	
From 30 ft. to 80 ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS:		From _____ ft. to _____ ft.	
From 20 ft. to 80 ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	

6 GROUT MATERIAL:		1 Neat cement 2 Cement grout 3 Bentonite 4 Other	
Grout Intervals From 3 ft. to 20 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
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
Direction from well? East		How many feet? 20ft.	
		13 Insecticide Storage 16 Other (specify below)	
		14 Abandoned water well	
		15 Oil well/ gas well	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	14	Clay			
14	80	Shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **3-5-2007** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **740** This Water Well Record was completed on (mo/day/year) **3-20-2007**

under the business name of **Weninger Drilling Inc.** by (signature) *Rekely Weninger*

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 <http://www.kdheks.gov/waterwell>.