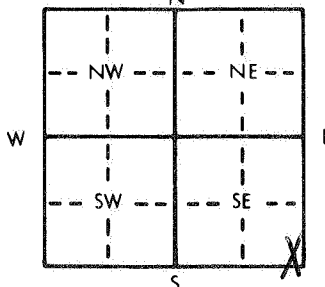


LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 15 Township Number T 25 S Range Number R 1 E E/W
 County: SEDGWICK
 Distance and direction from nearest town or city street address of well if located within city?
030 East/ 101st North Wichita, Kansas

WATER WELL OWNER: C.L. Bayes Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: 3030 E. 101st North
 City, State, ZIP Code: Wichita, Kansas Application Number: _____

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



DEPTH OF COMPLETED WELL: 50 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 14 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 14 ft. below land surface measured on mo/day/yr 10-4-84
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 11 in. to _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No XX; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes XX No _____

TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Clamped _____
 2 PVC 4 ~~ABS~~ 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Cer-Mac styrene SDR-26 Threaded _____
 Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight 1.59 lbs./ft. Wall thickness or gauge No. 203
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile ~~ABS~~ 11 Other (specify) _____
 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped ~~ABS~~ 10 Other (specify) _____
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 4 ft. to 14 ft. to _____ 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 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage _____

Direction from well?		How many feet?	
FROM	TO	LITHOLOGIC LOG	LITHOLOGIC LOG
0	3	Topsoil	
3	15	Clay	
15	21	Fine Sand	
21	33	Medium Sand	
33	50	Gray Shale	

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) 10-4-84 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/yr) 4-15-85 under the business name of Harp Well & Pump Service, Inc. by (signature) Mary Arnold
 INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.