

WCC-9

LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>SEDGWICK</u>		<u>SE 1/4</u> <u>SE 1/4</u> <u>SW 1/4</u>	<u>26</u>	<u>T 25</u> <u>S</u>	<u>R 2</u> <u>EW</u>
Distance and direction from nearest town or city? <u>APPROXIMATELY 10 MILES NE OF WICHITA</u>			Street address of well if located within city?		
WATER WELL OWNER: Name: <u>KIES</u> Address: <u>PO BOX 745</u> City, State, ZIP Code: <u>WICHITA, KANSAS 67201</u>			Board of Agriculture, Division of Water Resources Application Number: <u>15-S1</u>		
DEPTH OF COMPLETED WELL: <u>48</u> ft.		Bore Hole Diameter: <u>4</u> in. to <u>48</u> ft.			
Well Water to be used as:		5 Public water supply		8 Air conditioning	
1 Domestic 3 Feedlot		6 Oil field water supply		11 Injection well	
2 Irrigation 4 Industrial		7 Lawn and garden only		12 Other (Specify below)	
Well's static water level: <u>39.8</u> ft. below land surface measured on <u>JULY</u> month <u>15</u> day <u>1981</u> year		10 Observation well			
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile	
1 Steel		3 RMP (SR)		6 Asbestos-Cement	
2 PVC		4 ABS		7 Fiberglass	
Blank casing dia _____ in. to _____ ft.		Dia _____ in. to _____ ft.		Dia _____ in. to _____ ft.	
Casing height above land surface: _____ in., weight _____ lbs./ft.		Wall thickness or gauge No. <u>SCHEDULE 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		5 Fiberglass		8 RMP (SR)	
1 Steel		3 Stainless steel		11 Other (specify)	
2 Brass		4 Galvanized steel		12 None used (open hole)	
Screen or Perforation Openings Are:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		3 Mill slot		6 Wire wrapped	
2 Louvered shutter		4 Key punched		7 Torch cut	
Screen-Perforation Dia _____ in. to _____ ft.		Dia _____ in. to _____ ft.		Dia _____ in. to _____ ft.	
Screen-Perforated Intervals: 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.	
GROUT MATERIAL:		1 Neat cement		2 Cement grout	
Grouted Intervals: From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
What is the nearest source of possible contamination:		10 Fuel storage		14 Abandoned water well	
1 Septic tank		4 Cess pool		7 Sewage lagoon	
2 Sewer lines		5 Seepage pit		8 Feed yard	
3 Lateral lines		6 Pit privy		9 Livestock pens	
Direction from well: <u>NORTHWEST</u>		How many feet: <u>APPROX. 1750</u>		Water Well Disinfected? Yes _____ No <u>X</u>	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u>		If yes, date sample was submitted _____ month _____ day _____ year		Pump Installed? Yes _____ No <u>X</u>	
If Yes: Pump Manufacturer's name _____		Model No. _____		HP _____ Volts _____	
Depth of Pump Intake _____ ft.		Pumps Capacity rated at _____ gal./min.			
Type of pump:		1 Submersible		2 Turbine	
		3 Jet		4 Centrifugal	
		5 Reciprocating		6 Other	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>399</u>					
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>WOODWARD-CLYDE CONSULTANTS</u> by (signature) <u>Richard H. Melchior</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG		LITHOLOGIC LOG	
		FROM 0 TO 8 ft. DK BROWN CLAY TOPSOIL		FROM 32 TO 48 ft. AS ABOVE W/ HARD CARBONATE ZONES FROM SEVERAL INCHES TO 1 ft thick.	
		8 TO 11 ft. YELLOW-BROWN SILTY CLAY W/ SCATTERED CARBONATE			
		11 TO 13 ft. AS ABOVE W/ ABUNDANT RED MOTTLING			
		13 TO 15 ft. YELLOW-BROWN W/ GRAY GREEN MOTTLE, LESS RED THAN ABOVE. SOME IRON STAIN.			
		15 TO 32 ft. CONTAINS SAME W/ SLIGHT INCREASE IN CARBONATE			
ELEVATION:		Depth(s) Groundwater Encountered: 1. <u>44</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft.		(Use a second sheet if needed)	

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.