

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	SEDGWICK	NE 1/4^{CF} SE 1/4 1/4	36	T-26-S	R-1-E

Distance and direction from nearest town or city street address of well if located within city?

35' WEST OF WOODLAWN AND 55' NORTH OF WILLOWOOD

2	WATER WELL OWNER:	CITY OF WICHITA - PARK DEPT
RR #, St. Address, Box #:	455 N. MAIN	Board of Agriculture, Division of Water Resources
City, State, ZIP Code :	WICHITA, KS 67202	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 17.5 ft
		WELL'S STATIC WATER LEVEL 11.5 ft. WELL WAS USED AS: ① Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other	
Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes <input checked="" type="checkbox"/> No			

5	TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass ⑨ Other (Specify below)	BRICK
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter 6.0 in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much Casing height above or below land surface 6.0 in.	

6	GROUT PLUG MATERIAL:	1 Neat cement ② Cement grout 3 Bentonite 4 Other	
Grout Plug Intervals: From 3 ft. to 6 ft., From ft. to ft., From to ft.			
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage ⑬ Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage STORM SEWER 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well			
Direction from well? EAST How many feet? 30			

FROM	TO	PLUGGING MATERIALS
17.5	6.0	SAND - 225 cu.ft.
6.0	3.0	CEMENT GROUT-59 cu.ft.
3.0	0	SOIL - 59 cu. ft.

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-16-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 1-17-01 under the business name of CITY OF WICHITA - PARK DEPT. by (signature)
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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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.