

1 LOCATION OF WATER WELL:		Fraction	Section	Number	Township	Number	Range	Number
County: SEDGWICK		NE 1/4 NE 1/4 SE 1/4	31		T26S		R1E	
Distance and direction from nearest town or city street address of well if located within city? Pit by detached garage - 1125 W. 33rd N Wichita KS 67203								
2 WATER WELL OWNER:		Billie Frederick 1040 Westwind Valley Center KS 67147						
RR #, St. Address, Box #: City, State, ZIP Code :		Board of Agriculture, Division of Water Resources Application Number: Unknown						
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 46 ft WELL'S STATIC WATER LEVEL 13 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 X If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes X No						
5 TYPE OF BLANK CASING USED:		1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter 6 in. Was casing pulled? Yes No X If yes, how much Casing height above or below land surface 5 ft in.						
6 GROUT PLUG MATERIAL:		1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From 13 ft. to 5 ft., From 5 ft. to 0 ft., From to to What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage 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? SOUTH How many feet? 3						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:		This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/29/01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 620 This Water Well Record was completed on (mo/day/year) 11/29/01 under the business name of JMS - Inc. by (signature) [Signature]						
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.								