

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>NW 1/4 NE 1/4 NW 1/4</u>	<u>16</u>	T <u>26</u> S	R <u>1</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>SW corner of intersection of Air Cap Dr and North 1st St Park City, KS</u>					
2 WATER WELL OWNER: <u>City of Park City</u>					
RR#, St. Address, Box #: <u>6110 N. Hydraulic</u>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code: <u>Park City, KS 67219</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH		4 DEPTH OF COMPLETED WELL: <u>32.5</u> ft. ELEVATION:			
AN "X" IN SECTION BOX:		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>24.21</u> ft. below land surface measured on mo/day/yr <u>10-21-02</u>			
		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: <u>8</u> in. to <u>32.5</u> 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 Domestic (lawn & garden) <u>10 Monitoring well MW-4</u>			
Was a chemical/bacteriological sample submitted to Department? Yes. <u>No</u> ; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes No					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued. .... Clamped. ....					
<u>2</u> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded. ....					
7 Fiberglass Threaded. ....					
Blank casing diameter <u>2</u> in. to <u>32.5</u> ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.					
Casing height above land surface: <u>0</u> in., weight <u>sch 40</u> lbs./ft. Wall thickness or gauge No. ....					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass <u>2</u> PVC 10 Asbestos-cement					
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) ....					
9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot <u>3</u> Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)					
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes					
7 Torch cut 10 Other (specify) .... ft.					
SCREEN-PERFORATED INTERVALS: From <u>32.5</u> ft. to <u>12.5</u> ft., From .... ft. to .... ft.					
GRAVEL PACK INTERVALS: From <u>32.5</u> ft. to <u>10</u> ft., From .... ft. to .... ft.					
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
0.0	3.0	Vegetation, dark brown silty clay, moist, no odor	15.0	17.0	small gravel, soft, moist, no odor
3.0	6.5	olive brown silty clay with organics, limestone fragments, possible fill material, moist, no odor			dark brown to black silty clay with organics, moderate stiffness, moist, no odor
6.5	12.0	dark brown silty clay with organics, stiff, moist, possible fill material, no odor	17.0	20.0	Dark brown silty clay with some sand, soft, moist, no odor
10.0	12.0	dark brown silty clay with organics, some sand, stiff, moist, no odor, possible fill material	20.0	25.0	Dark brown silty clay, moist, no odor
			25.0	27.0	Dark brown silty clay with some sand, soft, moist, no odor
			27.0	31.5	light tan brown weathered shale
			31.5	32.5	Olive brown shale, bedrock
12.0	15.0	Grey brown silty clay with			
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) <u>10/11/02</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's Licence No. <u>614</u> This Water Well Record was completed on (mo/day/yr) <u>12/5/02</u>					
under the business name of <u>Maxim Technologies</u> by (signature) <u>William Huffer</u>					
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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					