11.55	<u> </u>	5 W.E.	<u>'</u>					7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7		· · · · · ·	T		
	ON OF WATE	K WELL:	Fraction					ction Numb		ship Number	_	Numbe	
County:	<u>Sedwick</u>		NW	1/4	NVV 3	4 NW	1/4	19	T	26 s	R	1	E/W
Distance an	nd direction from	m nearest tow	n or city stre	et addre	ss of well i	it located wi	thin city?						-
2435 W. S	53 RD St. N -	<u> ۲۵۰ ځه ۲</u>	<u>op</u>						 	····			
2 WATER	WELL OWNE	R: James	T. Ross										
RR#, St. Ad	idress, Box#	: 825 E 2	2 ^{na}						Board o	f Agriculture, Divi	sion of Wat	er Reso	urces
City State	ZIP Code	Wichit	a. Ks 672	202					Applica	lion Number:			
LOCATE	E WELL'S LOC	HTIW NOTA	T.I						Уфрасс	aon nambor.			
3 AN "X" I	N SECTION B	OX:	DEPTH	OF CO	IPLETED	WELL	2	5 ft. EL	EVATION:				
	N		Denth(s) Gr	nundwa	ter Encour					ft.			
4 13	ر												''' ;
T		1 1								sured on mo/day/			
i	NW	NF		Pump te	st data:	Well water v	vas		ft. after	hours p	umping		gpm
										hours p			gpm
# w			Bore Hole C	Diameter	8	in to	2	5	ft and	ir	ı to		ft.
- ₹ '' □	i	ī	WELL WAT	FR TO	BÉ ÚSED.	ĀŠ: 5 Pūl	olic water s	sunniv	8 Air c	ir onditioning 1 atering 1	1 Injection	well	·''' į
	!		1 Don	nestic	3 Feed lo	t 6 Oil	field water	supply	9 Dew	aterina 1:	2 Other (St	ecify be	low)
	sw	- SE	2 Irrig	ation	4 Industri	al 7 las	un and da	den (dome	etic) 10 Mo	nitoring well			´
1 1	i I	į I	2 iiig	auvii	* HOUSUS	ai / Lai	vii aliu yai		SUC) [10]WIO	V			
<u>ا</u> ل			Was a chen	nical/bad	teriologica	ıi sample su	bmitted to			No X If yes.			was
	S		submitted						Water Well Dis	infected? Yes	11	10 X	
5 TYPE O	F BLANK CAS	ING USED:			5 Wrough	t Iron	8 Conc	rete tile	CASIN	G JOINTS: Glue	d C	Clamped	
1 Ste					•								
		3 RMP ((SK)			s-Cement	a Other	(specity be	eiOW)	vveid	ed	·	
2 PV		4 ABS			7 Fibergla					Thre	aded	<u>X</u>	
Blank casin	g diameter	2	in. to	23	ft., Dia	1	in.	to	ft., Dia	ess or gauge No.	in. to	_	ft.
Casina hair	hrel evode thr	eurfaca	0	in	wolaht		716	the A	ff Wall thickn	ese or nauna No		154	
TVDE OF	SCREEN OR P	EDEODATIO	N MATERIAL	H1.	, weight	:	7	ייפטו	it. Vvali tillokir) Asbestos-ceme	nt		
1		CREORATIO	N WATERIAL		F Fiberel				11				
1 Ste		3 Stainle	ess steel nized steel		o Fibergia	ass	0	KMP (SK	.) 1	Other (specify) None used (open			
2 Br		4 Galvai	nized steel	,	o Concre	te tile	. 9	│PVC RMP (SR ABS	12				
1	OR PERFORAT					5 Gauze	a wrapped		8 Saw c	ut	11 None	(open ho	ole)
1 Co	ontinuous siot	3	Mill slot			6 Wire w	rapped		9 Drilled	holes			
2 Lo	uvered shutter	4	Key punche	d		7 Torch	cut		10 Other	(specify)			
SCREEN-P	PERFORATED	INTERVALS:	From	2	3 f	t. to	25	· ft.	. From	ft. 1	o		ft.
			Erom					a	Erom	A	•		Α
					 '			IL	. FIOIH	ft. 1			"
GR	RAVEL PACK II	NTERVALS:	From	7	1 f	t. to	ZU	ft	. From	ft. 1	io		ft.
			From		f	t. to		ft	. From	ft. 1	0		ft.
6 GROUT	MATERIAL:	1 Neat	cement	2 C	ement aro								
Carra Image	vala Farm	4	A 4-	44	A F		4	**		rom	A 40		
					. IL FION		IL.						
1	nearest sourc	e of possible	contaminatio	n:					estock pens		andoned wa		
1 Se	eptic tank		4 Lateral l	lines	7	Pit privy		11 Fu	el storage	15 Oil	well/ Gas w	/ell	
2 Se	ewer lines		5 Cess po	ool	8	Sewage I	agoon	12 Fe	rtilizer storage	16 Ot	ner (specify	below)	
3 W	atertight sewer	lines	6 Seepag	e pit	9	Feedyard		13 ins	secticide stora	ge CON	TAMINA	TED S	SITE
Direction fro	_		- r - g	•	_	,		How ma					
FROM	TO	CODE	1 17	THOLOG	SIC LOG		FROM	TO	1	PLUGGING II	ITERVALS		
0	.5		PHALT		200		1,1,014			. 200011011			+
.5	3		AY TO C	IAVE	V ell T		 		-				———
							 						
3	7		NSE CL			<u> </u>	ļ						
7	13	FII	NE TO MI	ED GF	MINED	SD,							
			RACE SM.			.,loose	<u> </u>						
13	25	W	et sand &	grav	əl				1				
	1										****		
	†						† · · · ·						
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							<u> </u>		<u> </u>				
7 CONTR	ACTOR'S OR	LANDOWNE	R'S CERTIFI	CATION	: This wa	er well was	(1) constru	cted, (2) red	constructed, or	(3) plugged unde	r my jurisdic	tion and	was
	on (mo/day/yr)			4-28-0	5					est of my knowled			
		1			554					•	-	5-20-	l l
1	Contractor's L						I DIS	vvater Well	record was c	ompleted on (mo	uay/y/)	7-20-	
under the b	ousiness name	of	W	oortei	rump	& Well In	IC.		by (signature	Day-C	Whish	W.	
INSTR	RUCTIONS:. Ple	ase fill in blank	s and circle th	e correct	answers.	Send three or	pies to Kar	sas Departn	nent of Health a	nd Environment, Bi retain one for your	reau of Wat	er, 1000 s	sw
Jackso	on St., Ste. 420,	Topeka, Kansa	as 66612-1367	 Telept 	one: 913-2	96-5545. Se	nd one to V	VATER WEL	L OWNER and	retain one-for your	records. *		