WAIL	K WELL	KECUKD	roim wwc-							
1 LOCA	ATION OF	WATER WELL:	Fraction SW SE N				Township Number T 26s S			
Distance a	and direction	n from nearest town	or city street address o	f well if G	lobal Pos	sitioning	System (decimal des	grees, min. of 4 digits)		
County: Sedgwick 16: 1/4 16: 1										
4201 N Sencea Longitude:										
2 WATER WELL OWNER: Gene Bellows Elevation:										
RR#. 5	RR#, St. Address, Box # : 4201 N Seneca						Datum:			
City, State, ZIP Code : Wichita, Ks 67204						Data Collection Method:				
3 LOC4	TE WELL	2S 4 DEPTH OF	COMPLETED WEI	LL 60			ft.			
LOCA		Jo   DEI III GI	COMILECTED WELL							
1	1 AN "X" I	N Depth(s) Group	advester Encountered I			<b>A</b> 2	A 2	Δ.		
t .		Depui(s) Groun	ndwater Encountered I			11. 2		, It.		
SECT	ION BOX	WELL'S STA	ΓΙC WATER LEVEL	18 n.	below la	ind surfa	ce measured on mo/	day/yr		
	N	Pump	test data: Well water	r was	ft.	after	hours pump	oing gpm		
	i	Est. Yield 40	gpm: Well water	r was	ft.	after	hours pump	oing gpm		
l ⊢n'n	V		R TO BE USED AS: 5	Public wa	ter supply	v 8 Air	conditioning 11 1	niection well		
1 1 i	`   `` X									
W Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well										
SW - SE - Was a shawing lawing lawing lawing a submitted to Department? Was a law of the same was deviced										
Was a chemical/bacteriological sample submitted to Department? Yes No x; If yes, mo/day/yrs Sample was submitted Water Well Disinfected? Yes x No										
	S									
5 TYPE	OF CASI	NG USED: 5	Wrought Iron	8 Concret	e tile	CASI	NG JOINTS: Glued	x Clamped		
1 51	-el	3 RMP (SR) 6	Asbestos-Cement	9 Other (s	necify he	low)	Weld	ed		
(a) BY	ici ic	1 ADC 7	Fiberales	> Other (S	peeny oc	,,,,,	Three	dad		
D PV		4 ADS /	ribergiass				111169	iucu		
Blank cas	ing diamete	r 5 in. to	43 It., Dia		n. to	π.,	Dia in	. ton.		
Casing he	ight above	land surface 12	in., Weight	2.40	lbs.	/ft. Wall	thickness or gauge	No. <b>160psi</b>		
PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter 5 in. to 43 ft., Dia in. to ft., Dia in. to ft. Casing height above land surface 12 in., Weight 2.40 lbs./ft. Wall thickness or gauge No. 160psi TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)										
l Co	ntinuous sl	ot 3 Mill slot	5 Guaze wrapped	l 7 Forch	cut	9 Drille	d holes 11 None	e (open hole)		
2 Lo	uvered shul	ter 4 Key punche	d 6 Wire wrapped	8 Saw (	Jut	10 Otner	(specity)			
SCREEN-	-PERFORA	TED INTERVALS:	From 43	to	60	tt. Fro	omtt.	to ft.		
ŀ			From	ft. to		ft. Fro	om ft.	to ft.		
GR	<b>LAVEL PAG</b>	CK INTERVALS:	From <b>20</b>	ft. to	60	ft. Fro	om ft.	to ft.		
			From From 20 From	ft. to		ft. Fro	om ft.	to ft.		
( CDOI	IT MAATE	DIAI. 1 Neet com	ant 2 Coment grout	(2) Rento	nita	1 Other				
O GRO	UI WIALIEI	NIAL: I NEALCEIL	20 A F	DEIRO	111tC .	4 Ollici	E	Δ 4		
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals From 3 ft. to 20 ft. From ft. to ft. From ft. to ft.										
What is the nearest source of possible contamination: Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify										
	ver lines		8 Sewage lagoon				ndoned water well	below)		
		er lines 6 Seepage	oit 9 Feedyard				well/ gas well			
Direction	from well?	South		How many	feet? 20	0				
FROM	ТО	LITHO	LOGIC LOG	FROM	ТО	Τ	PLUGGING INT	ERVALS		
0	1	Top soil	LOGIC LOG	1 KOW	10	<del> </del>	TECCOMO INT	LICTIES		
1	38	Med sand	**************************************		<del> </del>	<del>                                     </del>				
38	40	Clay		<del></del>	<del> </del>	<del> </del>	<u>,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,</u>			
		Med sand			<del> </del>	<del> </del>				
40	52				<del> </del>	<del>                                     </del>				
52	56	Clay			<del> </del>	ļ				
56	60	Shale			<del> </del>	<del> </del>		<del></del>		
	ļ				<del> </del>	<del> </del>		<u> </u>		
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		0.00.	EDIC CEDTIFIC: TI	ONL THE	<u> </u>	1				
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)  Kansas Water Well Contractor's License No.  740  This Water Well Record was completed on mo/day/year)  10-20-07  and this record is true to the best of my knowledge and belief.  This Water Well Record was completed on mo/day/year)  11-15-07										
Kansas Water Well Contractor's License No. 740 . This Water Well Record was completed on mo/day/year) 11-15-07 under the business name of Weninger Drilling Inc. by (signature)										
				_ by (signati	ле)			<u> </u>		
INSTRUCT	TIONS: Pleas	e fill in blanks or circle th	e correct answers. Send top	three copies to	Kansas De	epartment o	of Health and Environmen	nt, Bureau of Water,		
Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.										
your records	s. ree of \$5.00	for each constructed we	n. visit us at http://www.kd	icks.gov/wate	WCII.					