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1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Sedgewick	NE 1/4 SW 1/4 NW 1/4	29	26	1 NE EAST

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

4156 N ARKANSAS WICHITA KS 67204

2	WATER WELL OWNER: JACK BEARDMORE
RR#, St. Address, Box #:	4156 N ARKANSAS
City, State, ZIP Code:	Wichita KS 67204
Board of Agriculture, Division of Water Resources	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S	4	DEPTH OF WELL.....25.....ft. WELL'S STATIC WATER LEVEL.....1.5.....ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> <p>1 Domestic</p> <p>2 Irrigation</p> <p>3 Feedlot</p> <p>4 Industrial</p> </div> <div> <p>5 Public Water Supply</p> <p>6 Oil Field Water Supply</p> <p>7 Lawn and Garden Only</p> <p>8 Air Conditioning</p> </div> <div> <p>9 Dewatering</p> <p>10 Monitoring Well</p> <p>11 Injection Well</p> <p>12 Other.....</p> </div> </div>
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Was a chemical/bacteriological sample submitted to Department? Yes....No...  
If yes, mo/day/yr sample was submitted.....

Water Well Disinfected: Yes. X... No.....

5	TYPE OF BLANK CASING USED:
<div style="display: flex; justify-content: space-between;"> <div> <p>1 Steel</p> <p>2 PVC</p> </div> <div> <p>3 RMP (SR)</p> <p>4 ABS</p> </div> <div> <p>5 Wrought</p> <p>6 Asbestos-Cement</p> </div> <div> <p>7 Fiberglass</p> <p>8 Concrete Tile</p> </div> <div> <p>9 Other (specify below)</p> </div> </div>	
Blank casing diameter.....1 1/4.....in.	Was casing pulled? Yes. X... No..... If yes, how much.....10'.....
Casing height above or below land surface.....10'.....Below	

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other..... Grout Plug Intervals: From.....2.5.....ft. to.....1.5.....ft., From.....ft. to.....ft., From..... to.....ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> <p>1 Septic tank</p> <p>2 Sewer lines</p> <p>3 Watertight sewer lines</p> <p>4 Lateral lines</p> <p>5 Cess Pool</p> </div> <div> <p>6 Seepage pit</p> <p>7 Pit privy</p> <p>8 Sewage lagoon</p> <p>9 Feedyard</p> <p>10 Livestock pens</p> </div> <div> <p>11 Fuel storage</p> <p>12 Fertilizer storage</p> <p>13 Insecticide storage</p> <p>14 Abandoned water well</p> <p>15 Oil well/Gas well</p> </div> <div> <p>16 Other (specify below)</p> </div> </div>
Direction from well? .....NORTH.....	How many feet? .....3.....

FROM	TO	PLUGGING MATERIALS
25'	15'	CEMENT GROUT
15'	0	Compacted Soil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year).....8-28-78..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/year).....8-28-78..... under the business name of ..... by (signature) ..... Jack Beardmore .....
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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: 913/296-3565. Send one to Water Well Owner and retain one for your records.