

(A)

1 LOCATION OF WATER WELL		Fraction <u>SW NW SW SW</u>		Section Number, <u>31</u>		Township Number <u>26</u>		Range Number <u>6</u>	
County: <u>Sedgwick</u>		<u>SW 1/4 SW 1/4 SW 1/4</u>							
Distance and direction from nearest town or city?				Street address of well if located within city? <u>3125 N Sedgwick</u>					

2 WATER WELL OWNER: <u>B. Kester</u>		Board of Agriculture, Division of Water Resources	
RR#, St. Address, Box #: <u>3125 N Sedgwick</u>		Application Number:	
City, State, ZIP Code: <u>Wichita Kansas</u>			

3 DEPTH OF COMPLETED WELL: <u>30</u> ft. Bore Hole Diameter: <u>8</u> in. to <u>30</u> ft. and _____ in. to _____ ft.	
Well Water to be used as:	
1 Domestic 3 Feedlot 2 Irrigation 4 Industrial	5 Public water supply 6 Oil field water supply 7 <u>Lawn and garden only</u>
8 Air conditioning 11 Injection well 9 Dewatering 12 Other (Specify below) 10 Observation well	
Well's static water level: <u>16</u> ft. below land surface measured on _____ month <u>28</u> day <u>81</u> year	
Pump Test Data: Well water was <u>16</u> ft. after <u>3</u> hours pumping _____ gpm	
Est. Yield <u>10</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm	

4 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		Casing Joints: Glued _____ Clamped _____	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)	
2 <u>PVC</u>		4 ABS		7 Fiberglass		Welded _____ Threaded _____	
Blank casing dia: <u>5</u> in. to <u>25 DP</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Casing height above land surface: <u>12</u> in., weight <u>100</u> lbs./ft. Wall thickness or gauge No. <u>1/4</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:		5 Fiberglass		8 RMP (SR)		10 Asbestos-cement	
1 Steel		3 Stainless steel		9 ABS		11 Other (specify) _____	
2 Brass		4 Galvanized steel		6 Concrete tile		12 None used (open hole)	
Screen or Perforation Openings Are:		5 Gauzed wrapped		8 <u>Saw cut</u>		11 None (open hole)	
1 Continuous slot		3 Mill slot		6 Wire wrapped		9 Drilled holes	
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify) _____	
Screen-Perforation Dia: <u>5</u> in. to <u>5</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>25</u> ft. to <u>30</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>No</u> ft. to <u>No</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							

5 GROUT MATERIAL:		1 <u>Neat cement</u>		2 Cement grout		3 Bentonite		4 Other _____	
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:		1 Septic tank		4 Cess pool		7 Sewage lagoon		10 Fuel storage	
2 <u>Sewer lines</u>		5 Seepage pit		8 Feed yard		11 Fertilizer storage		14 Abandoned water well	
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage		15 Oil well/Gas well	
Direction from well: <u>North</u> How many feet: <u>50</u>								16 Other (specify below)	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____								Water Well Disinfected? Yes _____ No _____	
If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____									
Depth of Pump Intake: <u>None installed</u>								Pumps Capacity rated at _____ gal./min.	
Type of pump:		1 Submersible		2 Turbine		3 Jet		4 Centrifugal	
								5 Reciprocating	
								6 Other _____	

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>January</u> month <u>28</u> day <u>81</u> year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>3134</u>	
This Water Well Record was completed on <u>January</u> month <u>28</u> day <u>81</u> year under the business name of <u>Jet Drilling</u> by (signature) <u>W. J. Anderson</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
		0		1		Top soil							
		10		10		Brown Sand							
		15		25		Fine White Sand							
		15		30		White Gravel							
ELEVATION:													

Depth(s) Groundwater Encountered 1. <u>16</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft.		(Use a second sheet if needed)	
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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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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