

LOCATION OF WATER WELL: County: SEDGWICK		Fraction NW ¼ SE ¼ SE ¼	Section Number 11	Township Number T 26 S	Range Number R 1 E EW
Distance and direction from nearest town or city street address of well if located within city? <b>318 Comanche Ct. Kechi, Kansas</b>					
WATER WELL OWNER: R#, St. Address, Box # : City, State, ZIP Code :		Jim Reimers 318 Comanche Ct. Kechi, Ks.			
		Board of Agriculture, Division of Water Resources Application Number:			
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center; margin-top: 10px;">NW NE SW SE X</div>		DEPTH OF COMPLETED WELL..... 85 ft. ELEVATION: ..... Depth(s) Groundwater Encountered 1. 17 ft. 2. .... ft. 3. .... ft. WELL'S STATIC WATER LEVEL ..... 17 ft. below land surface measured on mo/day/yr 5-2-87 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 ..... 11 in. to ..... 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 Lawn and garden only 10 Observation well Was a chemical/bacteriological sample submitted to Department? Yes..... No XX If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes XX No			
TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 2 PVC 4 ABS		5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Z Clamped ..... 6 Asbestos-Cement 9 Other (specify below) Welded ..... 7 Fiberglass Cer-Mac styrene SDR-26 Threaded .....			
Blank casing diameter ..... 5 in. to 30 ft. Dia ..... in. to ..... ft. Dia ..... in. to ..... ft. Casing height above land surface ..... 12 in. weight ..... 1.59 lbs./ft. Wall thickness or gauge No. .203					
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS= 11 Other (specify) .....		7 PVC 10 Asbestos-cement 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 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) .....			
SCREEN-PERFORATED INTERVALS: From ..... 30 ft. to ..... 85 ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
GRAVEL PACK INTERVALS: From ..... 24 ft. to ..... 85 ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....					
Grout intervals: From ..... 4 ft. to ..... 24 ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) Direction from well? East How many feet? 65					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Topsoil			
3	25	Clay			
25	37	Fine Sand			
37	85	Gray Shale			
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) 5-2-87 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo/day/yr) 6-20-87 by signature Mary Arnold Under the business name of Harp Well & Pump Service, Inc.					
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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					