

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number	
County: <u>Sedgwick</u>		<u>NE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>18</u>		<u>T</u> <u>26</u> <u>S</u>	<u>R</u> <u>1E</u> <u>E/W</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>5717 N. Delaware Wichita, Ks.</u>							
2 WATER WELL OWNER: <u>Steve Saxion</u>							
RR#, St. Address, Box # : <u>5046 Primrose</u>				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : <u>Wichita, Ks.</u>				Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>32</u> ft. ELEVATION: <u>Grade</u>					
N W E S		Depth(s) Groundwater Encountered 1. <u>18</u> ft. 2. ft. 3. ft.					
		WELL'S STATIC WATER LEVEL <u>18</u> ft. below land surface measured on mo/day/yr <u>10-29-90</u>					
		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 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 Monitoring well					
		Was a chemical/bacteriological sample submitted to Department? Yes..... No.....; If yes, mo/day/yr sample was submitted					
		Water Well Disinfected? Yes <u>X</u> No					
5 TYPE OF BLANK CASING USED:							
1 Steel		<u>3 RMP (SR)</u>		5 Wrought iron		8 Concrete tile	
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)	
Blank casing diameter <u>6</u> in. to ft., Dia				7 Fiberglass		CASING JOINTS: Glued Clamped	
Casing height above land surface <u>36</u> in., weight lbs./ft.						Welded Threaded	
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC	
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)	
						10 Asbestos-cement	
						11 Other (specify)	
						12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut	
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes	
				7 Torch cut		10 Other (specify)	
						11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.							
FROM ft. to ft., FROM ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Intervals: From <u>0</u> ft. to <u>6</u> 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage	
						13 Insecticide storage	
Direction from well?		<u>West</u>				How many feet? <u>75ft</u>	
FROM		TO		LITHOLOGIC LOG		PLUGGING INTERVALS	
						cement grout	
						bentonite hole plug	
						chlorinated sand and gravel	
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) <u>10-29-90</u> and this record is true to the best of my knowledge and belief. Kansas							
Water Well Contractor's License No. <u>236</u>				This Water Well Record was completed on (mo/day/yr) <u>1-21-91</u>			
under the business name of <u>Harp Well and Pump Service, Inc.</u>				by (signature) <u>Mary Arnold</u>			
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.							