

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		<u>NW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>20</u>	T <u>26</u> S	R <u>1</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>4919 Kimberly Lane</u>					
2 WATER WELL OWNER: <u>M. Winholty</u>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>4919 Kimberly Lane</u>		Application Number: <u>none</u>			
City, State, ZIP Code: <u>Wichita Kan.</u>		<u>67204</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>35</u> ft. ELEVATION: <u>1300</u>			
		Depth(s) Groundwater Encountered 1. <u>15</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>15</u> ft. below land surface measured on <u>mo/day/yr</u> <u>10-17-89</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: <u>9</u> in. to <u>15</u> ft., and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		☒ 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 <u>X</u> ; If yes, <u>mo/day/yr</u> sample was submitted			
		Water Well Disinfected? Yes <u>X</u> No _____			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped _____			
1 Steel		Welded _____			
☒ RMP (SR)		Threaded _____			
2 PVC					
4 ABS					
Blank casing diameter <u>5.56</u> in. to <u>25</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>8DR 26</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		7 PVC			
3 Stainless steel		☒ RMP (SR)			
2 Brass		10 Asbestos-cement			
4 Galvanized steel		11 Other (specify) _____			
5 Fiberglass		12 None used (open hole)			
6 Concrete tile					
9 ABS					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped			
1 Continuous slot		8 Saw cut			
3 Mill slot		11 None (open hole)			
2 Louvered shutter		6 Wire wrapped			
4 Key punched		9 Drilled holes			
7 Torch cut		10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS:		From <u>25</u> ft. to <u>35</u> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
<u>none</u>					
6 GROUT MATERIAL:		3 Bentonite			
1 Neat cement		4 Other _____			
☒ Cement grout					
Grout Intervals: From <u>0</u> ft. to <u>15</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Livestock pens			
☒ Septic tank		14 Abandoned water well			
4 Lateral lines		11 Fuel storage			
2 Sewer lines		12 Fertilizer storage			
5 Cess pool		15 Oil well/Gas well			
3 Watertight sewer lines		16 Other (specify below)			
6 Seepage pit		13 Insecticide storage			
7 Pit privy		How many feet? <u>100</u>			
8 Sewage lagoon					
9 Feedyard					
Direction from well? <u>West</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>3</u>	<u>Top Soil</u>			
<u>3</u>	<u>15</u>	<u>Fine Tan Sand</u>			
<u>15</u>	<u>35</u>	<u>Coarse Tan Sand</u>			
<u>Plugged Sand Point well in Basement</u> <u>Drilled new cased well outside</u>					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☒ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) <u>10-17-89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>472</u> This Water Well Record was completed on (mo/day/yr) <u>11-20-89</u> under the business name of <u>Beardon Pump & Well Ser</u> by (signature) <u>David R Bech</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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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