

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		<u>NE 1/4 NW 1/4 NE 1/4</u>	<u>21</u>	<u>T 26 S</u>	<u>R 1 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1511 E. 53rd No.</u>					
2 WATER WELL OWNER: <u>Daniel Shugart</u>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>1511 E. 53rd</u>		Application Number:			
City, State, ZIP Code: <u>Wichita, KS 67219</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>30</u> ft. ELEVATION: .....			
<div style="text-align: center;">N W      E SW      SE</div>		Depth(s) Groundwater Encountered 1. <u>12</u> ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>12</u> ft. below land surface measured on mo/day/yr <u>9-11-83</u>			
		Pump test data: Well water was <u>25</u> ft. after <u>1/2</u> hours pumping <u>15</u> gpm			
		Est. Yield <u>15-17</u> gpm; Well water was ..... ft. after ..... hours pumping ..... gpm			
		Bore Hole Diameter <u>11</u> in. to <u>30</u> 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 <u>X</u> .....; If yes, mo/day/yr 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		5 Wrought iron	8 Concrete tile	Welded .....	
2 PVC		6 Asbestos-Cement	9 Other (specify below)	Threaded .....	
3 RMP (SR)		7 Fiberglass			
4 ABS					
Blank casing diameter <u>5</u> in. to <u>20</u> ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.					
Casing height above land surface <u>12</u> in., weight <u>1.59</u> lbs./ft. Wall thickness or gauge No. <u>3DR-26</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC      10 Asbestos-cement			
1 Steel		5 Fiberglass	8 RMP (SR)	11 Other (specify) .....	
2 Brass		6 Concrete tile	9 ABS	12 None used (open hole)	
3 Stainless steel					
4 Galvanized steel					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped      8 Saw cut      11 None (open hole)			
1 Continuous slot		6 Wire wrapped	9 Drilled holes		
2 Louvered shutter		7 Torch cut	10 Other (specify) .....		
3 Mill slot					
4 Key punched					
SCREEN-PERFORATED INTERVALS:		From <u>20</u> ft. to <u>30</u> ft., From ..... ft. to ..... ft.			
		From ..... ft. to ..... ft., From ..... ft. to ..... ft.			
GRAVEL PACK INTERVALS:		From <u>13</u> ft. to <u>30</u> 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>3</u> ft. to <u>13</u> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
What is the nearest source of possible contamination:		10 Livestock pens      14 Abandoned water well			
1 Septic tank		7 Pit privy	11 Fuel storage	15 Oil well/Gas well	
2 Sewer lines		8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)	
3 Watertight sewer lines		9 Feedyard	13 Insecticide storage		
4 Lateral lines					
5 Cess pool					
6 Seepage pit					
Direction from well? <u>East</u>		How many feet? <u>90</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top Soil			
2	12	dark clay			
12	18	sand (fine to med)			
18	30	Brown Rockish shale.			
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>9-11-83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>318</u> This Water Well Record was completed on (mo/day/yr) <u>10-6-83</u> under the business name of <u>Wenger Pumping</u> by (signature) <u>Daniel Shugart</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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SEC. 21

NE 1/4 NW 1/4 NE 1/4