

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																	
County: Sedgwick		NE 1/4 NE 1/4 NE 1/4		32		T 26 S		R 1 EW																																																	
Distance and direction from nearest town or city street address of well if located within city? 3737 North Broadway, Wichita, Kansas HWST Job No.: 74-40/4022.01																																																									
2 WATER WELL OWNER: NORTHCUTT TRAILERS																																																									
RR#, St. Address, Box # : 5055 North Broadway Board of Agriculture, Division of Water Resources																																																									
City, State, ZIP Code : Wichita, Kansas 67219 Application Number:																																																									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 44.5 ft. ELEVATION: n/a																																																							
		Depth(s) Groundwater Encountered 1. 13.0 ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL 12.89 ft. below land surface measured on mo/day/yr 7/10/90 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 6.5 in. to 44.5 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 X0 Monitoring well MW-2 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes _____ No X _____																																																							
		5 TYPE OF BLANK CASING USED:																																																							
		1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded X _____ Blank casing diameter 2.0 in. to 9.5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface Flush in., weight _____ lbs./ft. Wall thickness or gauge No. Sch 40																																																							
		TYPE OF SCREEN OR PERFORATION MATERIAL:																																																							
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot X Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____																																																									
SCREEN-PERFORATED INTERVALS: From 9.5 ft. to 44.5 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 7.0 ft. to 44.5 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 volclay																																																									
Grout Intervals: From 0.0 ft. to 7.0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																									
What is the nearest source of possible contamination:																																																									
1 Septic tank X 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) 13 Insecticide storage Direction from well? Northwest How many feet? 60.0																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0.0</td> <td>5.0</td> <td>SILTY FAT CLAY: mottled very dark gray and dark reddish-brown.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5.0</td> <td>13.0</td> <td>SILTY LEAN CLAY: mottled light brown and dark reddish-brown.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>13.0</td> <td>14.0</td> <td>GRAVELLY CLAY: brown; 30-40% med. gravels.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>14.0</td> <td>16.0</td> <td>VERY FINE SAND: dark gray; fine poorly sorted sand.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>16.0</td> <td>30.0</td> <td>VERY FINE SAND: tan; well sorted; very fine to fine sand.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>30.0</td> <td>43.0</td> <td>COARSE SAND: tan; well sorted.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>43.0</td> <td>44.5</td> <td>WELLINGTON SHALE FORMATION.</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0.0	5.0	SILTY FAT CLAY: mottled very dark gray and dark reddish-brown.				5.0	13.0	SILTY LEAN CLAY: mottled light brown and dark reddish-brown.				13.0	14.0	GRAVELLY CLAY: brown; 30-40% med. gravels.				14.0	16.0	VERY FINE SAND: dark gray; fine poorly sorted sand.				16.0	30.0	VERY FINE SAND: tan; well sorted; very fine to fine sand.				30.0	43.0	COARSE SAND: tan; well sorted.				43.0	44.5	WELLINGTON SHALE FORMATION.			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (X) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7/5/90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 471 This Water Well Record was completed on (mo/day/yr) 7/16/90 under the business name of HWS Technologies Inc. by (signature) <i>[Signature]</i>																																																									
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.																																																									

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