

1 LOCATION OF WATER WELL: County: Sedgwick	Section Number 7	Township Number 27	Range Number 1E
--	----------------------------	------------------------------	---------------------------

Distance and direction from nearest town or city street address of well if located within city?
1531 Woodrow Ct

2 WATER WELL OWNER: RR#, St. Address, Box #: City, State, ZIP Code :	Todd Russell 1531 Woodrow Ct. Wichita 67203 Board of Agriculture, Division of Water Resources Application Number:
--	--

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">N <table border="1" style="width:100%; height: 100px; border-collapse: collapse;"> <tr><td style="width:25%;">NW</td><td style="width:25%;">NE</td></tr> <tr><td>W</td><td>E</td></tr> <tr><td>SW</td><td>SE</td></tr> <tr><td colspan="2" style="text-align: right;">X</td></tr> <tr><td colspan="2" style="text-align: center;">S</td></tr> </table> </div>	NW	NE	W	E	SW	SE	X		S		4 DEPTH OF WELL..... 43ft. WELL'S STATIC WATER LEVEL..... 22ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply <u>7 Lawn and Garden Only</u> 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other..... </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted..... Water Well Disinfected: Yes..... No <input checked="" type="checkbox"/>
NW	NE										
W	E										
SW	SE										
X											
S											

5 TYPE OF BLANK CASING USED:	<div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 PVC </div> <div> 3 RMP (SR) 4 ABS </div> <div> 5 Wrought 6 Asbestos-Cement </div> <div> 7 Fiberglass 8 Concrete Tile </div> <div> 9 Other (specify below) </div> </div> Blank casing diameter..... 8in. Was casing pulled? Yes..... No <input checked="" type="checkbox"/> Casing height above or below land surface..... 9 feet below in a cistern
------------------------------	---

6 GROUT PLUG MATERIAL:	1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other..... Grout Plug Intervals: From 22 ft. to 9 ft., From.....ft. to.....ft., From..... to.....ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines <u>3 Watertight sewer lines</u> 4 Lateral lines 5 Cess Pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> 16 Other (specify below) </div> </div> Direction from well? South How many feet? 30'
------------------------	---

FROM	TO	PLUGGING MATERIALS
43'	22'	05 washed sand
22'	11'	01 Bentonite
11'	9'	08 concrete
9'	0'	05 sand (Fill cistern)

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:	This water well was plugged under my jurisdiction and was completed on (mo/day/year)..... 7-5-99 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year)..... 7-8-99 under the business name of Todd Russell (home owner) by (signature) Todd Russell
--	---

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 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.

RECEIVED

JUL 09 1999

BUREAU OF WATER