		WAT	ER WELL RECORD	Form WWC-5	KSA 82a		
1 LOCATION OF		Fraction		Sec	tion Number	Township Number	
County: Sed		own or city street	address of well if located	1/4	6	т 27	S R (E/W
270	0 N. Amid	on, Wichi	ta, KS.	a within city?			
2 WATER WELL	OWNER: Ka	ansas Inc	./Citgo				
RR#, St. Address, Box # : 2700 N. Amidon				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Wichita, KS. 3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WE AN "X" IN SECTION BOX				Application Number:			
IOCATE WELL' AN "X" IN SEC	S LOCATION WITI TION BOX:	H 4 DEPTH OF	COMPLETED WELL)' 14	ft. ELEVA	TION:	. ft. 3
	$\frac{\gamma}{1}$	WELL'S STATE		73 # 15	olow land sur	face measured on mo/d	ay/yr 1-6-00
1 i							rs pumping gpm
NW -	NE	Fet Vield -	com: Well wate	r was	ft at	fter hou	rs numning anm
		Bore Hole Dian	neter \$\frac{1}{2}\daggerin. to	ao'		and	in. toft.
* w 1	1	WELL WATER	TO BE USED AS:	5 Public wate	r supply	8 Air conditioning	11 Injection well
ī sw.		1 Domestic	3 Feedlot	6 Oil field wa	ter supply	9 Dewatering	12 Other (Specify below)
3W .	SE	2 Irrigation					,
		Was a chemica	l/bacteriological sample s	submitted to De	epartment? Ye	esNo. 💢;	lf yes, mo/day/yr sample was sub
1	Ş	mitted			War	ter Well Disinfected? Y	es No
TYPE OF BLAN	IK CASING USED:		5 Wrought iron	8 Concre	ete tile	CASING JOINTS:	Glued Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other	(specify below	v)	Welded
2 PVC	2 3 ABS	10/	7 Fiberglass				ThreadedX
_	eter <i>2</i> .375	in. to 1 🔾	ft., Dia	in. to		ft., Dia	in. toSDR 13ft.
	ve land surface.	WWW.MC.	in., weight	<u></u>	Ibs./i	ft. Wall thickness or gau	ge No. SCH 40
TYPE OF SCREE	N OR PERFORATION	ON MATERIAL:		7 PV		10 Asbestos	-cement
1 Steel	3 Stainle	ss steel	5 Fiberglass	8 RM	IP (SR)	11 Other (sp	ecify)
2 Brass 4 Galvanized steel			6 Concrete tile	9 ABS			ed (open hole)
_	FORATION OPENI		5 Gauze	ed wrapped		8 Saw cut	11 None (open hole)
1 Continuous		Mill slot		wrapped		9 Drilled holes	
2 Louvered s		Key punched	7 Torch	~ /		` ' ' '	
SCREEN-PERFOR	NATED INTERVALS						. ft. to
0.5 4.1.5.		From					, ft. toft.
GHAVEL	PACK INTERVALS)			. ft. toft.
e GROUT MATER	DIAL 1 Nosi	From	ft. to	(A)	ft., Fror		ft. to ft,
6 GROUT MATER	From Kingal	t cement 2/	Cernent grout 3	, Gento	4	Outer	ft. toft. 14 Abandoned water well
What is the neares	t source of noesibl	Stamination:		π.	10 Lives	tock page	14. Abandonad water well
1 Septic tank			7 Pit privy	3	\sim		15 Oil well/Gas well
1 Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool		• •	11) Fuel storage		•		
3 Watertight sewer lines & Seepage pit		8 Sewage lago 9 Feedvard	oon 12 Fertilizer storage 13 Insecticide storage			16 Other (specify below)	
	? Not It		3 reedyald			ny feet? (50)	
FROM TO	· Norm	LITHOLOGIC	LOG	FROM	TO TO		NG INTERVALS
0 4	Grass-t			1			
4 14	Brn cla	y, firm,	non plastic,				
	organic	s, no odo	r.				
14 20	Wet at	14', sand	, fine grain	ed,			
	coarse	grained@1	8', subround	ed,			
	well so	rted at t	op to poorly				
			trong odor.				
							11 . n
						Fl. mt ok'	l by Don Taylor
				1			
J	1						
/ CONTRACTOR	'S OR LANDOWN	ER'S SEATIFICAT	FION: This water well wa	as (1 Construe	cted. (2) reco	nstructed, or (3) plugge	d under my jurisdiction and was
CONTRACTOR completed on (mo/	i 'S OR LANDOWNI day/year) /2-2/	ER'S SENTIFICAT					d under my jurisdiction and was
 completed on (mo/	day/year) 12-2/	1-99			and this recor	rd is true to the best of r	ny knowledge and belief. Kansas
completed on (mo/	day/year) /2-2/ ctor's License No.	7-77 539		ell Record wa	and this recor	rd is true to the best of ron (mo/day/yr) 2-3:	ny knowledge and belief. Kansas

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.