

MWH 116-D

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: SEDGWICK	SE 1/4 NW 1/4 NE 1/4	21	27	1-E																								
Distance and direction from nearest town or city street address of well if located within city? Just NE of Broadway & English Wichita KS																													
2	WATER WELL OWNER: The Colman Co																												
	RR #, St. Address, Box #: 250 N. St. Francis		Board of Agriculture, Division of Water Resources																										
	City, State, ZIP Code: Wichita KS 67207		Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:																												
	N <table border="1" style="border-collapse: collapse; width: 150px; height: 100px;"> <tr><td></td><td></td><td></td></tr> <tr><td>N W</td><td></td><td>X E</td></tr> <tr><td></td><td></td><td></td></tr> <tr><td>S W</td><td></td><td>S E</td></tr> <tr><td></td><td></td><td></td></tr> </table> S W E								N W		X E				S W		S E												
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4	DEPTH OF WELL 39 ft WELL'S STATIC WATER LEVEL ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering ☒ 10 Monitoring Well 11 Injection Well 12 Other Was a chemical / bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No																												
5	TYPE OF BLANK CASING USED:																												
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ☒ 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile																												
	Blank casing diameter 2 in. Was casing pulled? Yes ☒ No If yes, how much 30 Casing height above or below land surface 0 in.																												
6	GROUT PLUG MATERIAL: 1 Neat cement ☒ 2 Cement grout 3 Bentonite 4 Other																												
	Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft.																												
	What is the nearest source of possible contamination:																												
	1 Septic tank 2 Sewer lines ☒ 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)																												
	Direction from well? How many feet? 21																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>39</td> <td>0</td> <td>CEMENT Grout Via Trime</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	39	0	CEMENT Grout Via Trime																		
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4-5-00 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 575 This Water Well Record was completed on (mo/day/year) 4-17-00 under the business name of FUNKER DRILLING SERVICE by (signature) <i>Allen L. Funk</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 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.																													