

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>NE 1/4 SE 1/4 NE 1/4</u>	<u>19</u>	<u>T 27 S</u>	<u>R 1 EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>403 N. Seneca, Wichita</u>					
2 WATER WELL OWNER: <u>BDAT Environmental Inc. (QuickTap Corp.)</u>					
RR#, St. Address, Box #		City, State, ZIP Code		Board of Agriculture, Division of Water Resources	
<u>1862 Crabapple</u>		<u>St. Louis, MO 63146</u>		Application Number: <u>901 N. Ringo Rd, Tulsa, OK 74101</u>	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>20</u> ft. ELEVATION: <u>1297.90</u>			
		Depth(s) Groundwater Encountered <u>15.5</u> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>13.99</u> ft. below land surface measured on mo/day/yr <u>1-12-95</u>			
		Pump test data: Well water was <u>NA</u> ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>NA</u> gpm: Well water was <u>NA</u> ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter: <u>8</u> in. to <u>20</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 Monitoring well <u>MW-6</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>✓</u> ; If yes, mo/day/yr sample was sub- mitted _____ Water Well Disinfected? Yes _____ No <u>(X)</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
<u>2 PVC</u>		4 ABS		6 Asbestos-Cement	
				9 Other (specify below)	
				7 Fiberglass	
Blank casing diameter <u>2</u> in. to <u>10</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		CASING JOINTS: Glued _____ Clamped _____			
Casing height above land surface <u>0</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>40</u>		Welded _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:		Threaded _____			
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		8 RMP (SR)	
				11 Other (specify) _____	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		10 Asbestos-cement			
1 Continuous slot		<u>3</u> Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		8 Saw cut	
				11 None (open hole)	
				9 Drilled holes	
				10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>10</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>7.5</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement		<u>2</u> Cement grout		<u>3</u> Bentonite	
4 Other					
Grout Intervals: From <u>0</u> ft. to <u>1</u> ft., From <u>1</u> ft. to <u>7.5</u> ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				14 Abandoned water well	
				11 Fuel storage	
				15 Oil well/Gas well	
				12 Fertilizer storage	
				16 Other (specify below)	
				13 Insecticide storage	
Direction from well? <u>S</u>				How many feet? <u>75</u>	
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
<u>0 0.5</u>		<u>Asphalt</u>		<u>0 20</u>	
<u>0.5 2.0</u>		<u>Silty clay</u>		<u>Chip Bentonite</u>	
<u>2.0 20</u>		<u>Sand</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>5/19/00</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>634</u> This Water Well Record was completed on (mo/day/yr) <u>8/22/00</u> under the business name of <u>Shirley Enviro</u> by (signature) <u>Charles Egan</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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					