

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<i>Sedgewick</i>	<i>NW 1/4 SE 1/4 NW 1/4</i>	<i>16</i>	<i>T 27 S</i>	<i>R 1 E</i>

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

1055 N. Mosley

2	WATER WELL OWNER: <i>House Oil</i>	Board of Agriculture, Division of Water Resources Application Number:
RR #, St. Address, Box #:	<i>1055 N. Mosley</i>	
City, State, ZIP Code	<i>Wichita, Kansas</i>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <i>33</i> ft.
		WELL'S STATIC WATER LEVEL <i>NA</i> ft.	
		WELL WAS USED AS:	
		1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other	
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"/>			

5	TYPE OF BLANK CASING USED:
1 Steel	3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
<input checked="" type="radio"/> 2 PVC	4 ABS 6 Asbestos-Cement 8 Concrete Tile
Blank casing diameter <i>4</i> in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much	
Casing height above or below land surface in.	

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="radio"/> 3 Bentonite	4 Other
Grout Plug Intervals: From <i>0</i> ft. to <i>33</i> ft. From ft. to ft. From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank		6 Seepage pit		<input checked="" type="radio"/> 11 Fuel storage	
2 Sewer lines		7 Pit privy		12 Fertilizer storage	
3 Watertight sewer lines		8 Sewage lagoon		13 Insecticide storage	
4 Lateral lines		9 Feedyard		14 Abandoned water well	
5 Cess Pool		10 Livestock pens		15 Oil well/Gas well	
16 Other (specify below)					
Direction from well? How many feet?					

FROM	TO	PLUGGING MATERIALS
<i>0</i>	<i>14</i>	<i>Bentonite (11")</i>
<i>14</i>	<i>33</i>	<i>Bentonite (4")</i>

PTW

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <i>11/21/00</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>527</i> This Water Well Record was completed on (mo/day/year) <i>12/3/00</i> under the business name of <i>Geo. Carr Services, Inc.</i> by (signature) <i>Geo. Carr</i>
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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.