

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>SEDGWICK</u>	<u>1/4 NW 1/4 NE 1/4</u>	<u>29</u>	<u>27-S</u>	<u>1-E</u>

MWA 2

Distance and direction from nearest town or city street address of well if located within city?  
803 South Wichita St Wichita KS MWA 2

2 WATER WELL OWNER: <u>Jones Moving &amp; Storage</u>	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #: <u>803 S. Wichita St</u>	Application Number:
City, State, ZIP Code: <u>Wichita KS 67205</u>	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>20</u> ft											
<div style="text-align: center;">N</div> <table border="1" style="width:100%; height: 150px; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">NW</td> <td style="width:50%; text-align: center;">NE</td> </tr> <tr> <td style="width:50%; text-align: center;">SW</td> <td style="width:50%; text-align: center;">SE</td> </tr> </table> <div style="text-align: center;">S</div>	NW	NE	SW	SE	WELL'S STATIC WATER LEVEL <u>14</u> ft.							
	NW	NE										
	SW	SE										
	WELL WAS USED AS:											
<table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><input checked="" type="radio"/> 10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well										
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4 Industrial	8 Air Conditioning	12 Other										
Was a chemical / bacteriological sample submitted to Department? Yes ..... No <u>.....</u>												
If yes, mo/day/yr sample was submitted .....												
Water Well Disinfected: Yes ..... No <u>.....</u>												

5 TYPE OF BLANK CASING USED:	9 Other (Specify below)
1 Steel	5 Wrought
<input checked="" type="radio"/> 2 PVC	6 Asbestos-Cement
3 RMP (SR)	8 Concrete Tile
4 ABS	
Blank casing diameter <u>2</u> in.	Was casing pulled? Yes <u>.....</u> No ..... If yes, how much <u>10'</u>
Casing height above or below land surface <u>0</u> in.	

6 GROUT PLUG MATERIAL:	4 Other
1 Neat cement	<input checked="" type="radio"/> Cement grout
<input checked="" type="radio"/> Cement grout	<input checked="" type="radio"/> Bentonite
Grout Plug Intervals: From <u>1</u> ft. to <u>0</u> ft., From <u>20</u> ft. to <u>1</u> ft., From ..... to ..... ft.	
What is the nearest source of possible contamination:	
1 Septic tank	6 Seepage pit
2 Sewer lines	7 Pit privy
<input checked="" type="radio"/> 3 Watertight sewer lines	8 Sewage lagoon
4 Lateral lines	9 Feedyard
5 Cess Pool	10 Livestock pens
11 Fuel storage	16 Other (specify below)
12 Fertilizer storage	
13 Insecticide storage	
14 Abandoned water well	
15 Oil well/Gas well	
Direction from well? <u>East</u> How many feet? <u>110'</u>	

FROM	TO	PLUGGING MATERIALS
<u>20</u>	<u>1</u>	<u>Bentonite 3/8 chips</u>
<u>1</u>	<u>0</u>	<u>Quickrete</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>12-4-90</u>	and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>575</u>
This Water Well Record was completed on (mo/day/year) <u>3-8-91</u> under the business name of <u>FUNKER DRILLING SERVICE INC</u>	
by (signature) <u>[Signature]</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: 785/296-3565. Send one to Water Well Owner and retain one for your records.