

**LOCATION OF WATER WELL:**

Fraction Section Number Township Number Range Number

Sedgwick SW ¼ NW ¼ NE ¼ 4 T 29 R 1 EW

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

590' West of OHIO and 1370' South of 29<sup>TH</sup> STREET, Wichita, KS NMW-055

**WATER WELL OWNER:** City of Wichita

#, St. Address, Box #: 1900 E. 9<sup>TH</sup> STREET Board of Agriculture, Division of Water Resources

City, State, ZIP Code: Wichita, KS 67214 Application Number:

**LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

N  
NW X NE  
SW SE  
S

E

**DEPTH OF COMPLETED WELL:** 20.4 ft.

**ELEVATION:** . . . . . ft.

Depth(s) Groundwater Encountered 1. 13.6 ft. 2. . . . . ft. 3. . . . . ft.

**WELL'S STATIC WATER LEVEL** . . . . . ft. below land surface measured on mo/day/yr

Pump test data: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm

Est. Yield . 17.8 . gpm; Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm

Bore Hole Diameter. 2 1/8 . in. to . 20.5 . 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

Was a chemical/bacteriological sample submitted to Department? Yes.....No..X..... If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No X

**TYPE OF BLANK CASING USED:**

1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued . . . . . Clamped . . . . .

2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded . . . . .

Casing diameter 3/4 . in. to 10.3 . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.

Rising height above land surface Flush . in., weight . lbs./ft. Wall thickness or gauge No SCH 80

**KIND OF SCREEN OR PERFORATION MATERIAL:** ⑦ PVC 10 Asbestos-cement

1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)

2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

**SCREEN OR PERFORATION OPENINGS ARE:** 5 Gauzed wrapped 8 Saw cut 11 None (open hole)

1 Continuous slot ③ Mill slot 6 Wire wrapped 9 Drilled holes

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)

**SCREEN-PERFORATED INTERVALS:** From 10.3 ft. to 20.2 ft.

From . . . . . ft. to . . . . . ft.

**GRAVEL PACK INTERVALS:** From 7.6 ft. to 20.5 ft.

From . . . . . ft. to . . . . . ft.

**DROUT MATERIAL:** 1 Neat cement 2 Cement grout ③ Bentonite 4 Other

Intervals: From 0 ft. to 7.6 ft. From . . . . . ft. to . . . . . ft.

**What is the nearest source of possible contamination:**

1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well

2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well

3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)

Action from well? How many feet?

**LITHOLOGIC LOG**

FROM TO PLUGGING INTERVALS

0 14 Clay

14 20 SAND

**CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 2-13-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo/day/yr) 3-9-01 by the business name of Environmental Priority Service, Inc by signature [Signature]

**INSTRUCTIONS.** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send two 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.