

LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
City: Sedgwick	NW ¼ NE ¼ SE ¼	9	T 27 S	R 1 E
Distance and direction from nearest town or city street address of well if located within city?				
8' S of 17th St. and 40' E of I-135 Wichita, KS NWL-08D				
WATER WELL OWNER: City of Wichita				
St. Address, Box # : 1900 E. 9th STREET			Board of Agriculture, Division of Water Resources	
State, ZIP Code : Wichita, KS 67314			Application Number:	

N	NW	NE	E
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S	SW	SE	W

Depth(s) Groundwater Encountered ..... ft. 1. 2.45 ..... ft. 2. 3.45 ..... ft. 3. 4.45 ..... 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 174 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter 2 1/8 in. to 33.5 ft. and ..... in. to ..... ft.

WELL WATER TO BE USED AS:

1 Domestic	3 Feedlot	5 Public water supply	8 Air conditioning	11 Injection well
2 Irrigation	4 Industrial	6 Oil field water supply	9 Dewatering	12 Other (Specify below)
		7 Lawn and garden only	<u>10</u> 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 SCREEN OR PERFORATION MATERIAL:			<input checked="" type="radio"/> 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)

SEEN-PERFORATED INTERVALS: From 28.2 ft. to 33.3 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 26 ft. to 33.3 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
From \_\_\_\_\_ ft. to \_\_\_\_\_ 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)
			13 Insecticide storage	How many feet?

[illegible]

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) 1-16-01 and this record is true to the best of my knowledge and belief. Kansas  
Well Contractor's License No. 604 This Water Well Record was completed on (mo/day/yr) 3-12-01  
The business name of Environmental Priority Service, Inc by (signature) Dave Ray

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