

LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		NE 1/4 NE 1/4 NE 1/4	16	T 27 N	R 1 W
Distance and direction from nearest town or city street address of well if located within city?					
6' S of 13th St N and 217' W of Pennsylvania, Wichita, KS NMW-135					
WATER WELL OWNER: City of Wichita					
R#, St. Address, Box # : 1900 E. 9th 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:		4 DEPTH OF COMPLETED WELL: 19.7 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. 14.6 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 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	
2 PVC		4 ABS		6 Asbestos-Cement	
Blank casing diameter 3/4 in. to 9.9 ft. Dia _____				7 Fiberglass	
Casing height above land surface Flush in., weight _____ lbs./ft.				8 Concrete tile	
TYPE OF SCREEN OR PERFORATION MATERIAL:				9 Other (specify below) _____	
1 Steel		3 Stainless steel		10 Asbestos-cement	
2 Brass		4 Galvanized steel		11 Other (specify) _____	
		5 Fiberglass		12 None used (open hole)	
		6 Concrete tile			
		7 Torch cut			
		8 RMP (SR)			
		9 ABS			
		10 Other (specify)			
		11 Other (specify)			
		12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				11 None (open hole)	
				9 Drilled holes	
				10 Other (specify)	
SCREEN-PERFORATED INTERVALS: From 9.9 ft. to 19.7 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 8 ft. to 20 ft. From _____ ft. to _____ ft.					
GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other _____					
Grout Intervals: From 0 ft. to 8 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	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6	Clayey silt			
6	10	SAND			
10	14	Sandy 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) 1-16-01 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 under the business name of Environmental Priority Service, Inc by (signature) <i>Dan Ray</i>					
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.					

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