

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: SEDGWICK	SW 1/4 NW 1/4 SE 1/4	19	T27S	R1E																								
Distance and direction from nearest town or city street address of well if located within city? 1 ft North - detached garage 140 N. Glenn, Wichita KS																													
2	WATER WELL OWNER: G.A. Wiles 2859 Benjamin RR #, St. Address, Box #: Wichita, KS 67204 City, State, ZIP Code : Board of Agriculture, Division of Water Resources Application Number: Unknown																												
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 16 ft																										
<div style="text-align: center;">N</div> <table border="1" style="margin: auto; width: 150px; height: 150px;"><tr><td></td><td></td><td></td><td></td></tr><tr><td>NW</td><td></td><td>NE</td><td></td></tr><tr><td>W</td><td></td><td></td><td>E</td></tr><tr><td></td><td>SW</td><td>X</td><td>SE</td></tr><tr><td></td><td></td><td>S</td><td></td></tr></table>						NW		NE		W			E		SW	X	SE			S		WELL'S STATIC WATER LEVEL 10 ft.							
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WELL WAS USED AS:																													
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Was a chemical / bacteriological sample submitted to Department? Yes No X																													
If yes, mo/day/yr sample was submitted																													
Water Well Disinfected: Yes X No																													
5	TYPE OF BLANK CASING USED:																												
<table style="width:100%"><tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (Specify below)</td></tr><tr><td>2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr></table>						1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile															
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Blank casing diameter 2 in. Was casing pulled? Yes No X If yes, how much																													
Casing height above or below land surface 0 in.																													
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other																												
Grout Plug Intervals: From 16 ft. to 4 ft., From 4 ft. to 0 ft., From to ft.																													
What is the nearest source of possible contamination:																													
<table style="width:100%"><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below) treatment</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td></td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr></table>						1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below) treatment	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					
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/1/01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 628 This Water Well Record was completed on (mo/day/year) 12/1/01 under the business name of J.M. Enterprises by (signature) James M. Enterprises																												
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.																													