

[1] LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>SW ¼ SW ¼ SW ¼</u>	<u>34</u>	<u>T 27 S</u>	<u>R 1 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1708 E. Pawnee, Wichita, KS.</u>					
[2] WATER WELL OWNER: <u>Richard Hammer</u>		<u>MW-1</u> Board of Agriculture, Division of Water Resources Application Number:			
RR#, St. Address, Box #: <u>15 Northmore St.</u>					
City, State, ZIP Code: <u>Daglish, West Australia 6008</u>					
[3] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		[4] DEPTH OF COMPLETED WELL: <u>24.8</u> ft. ELEVATION: <u>TBC 1285.55</u>			
A 2x2 grid representing a section box. The quadrants are labeled NW, NE, SW, and SE. An 'X' is marked in the SW quadrant. A north arrow points upwards.		Depth(s) Groundwater Encountered 1. <u>17</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>17</u> ft. below land surface measured on mo/day/yr <u>8-29-02</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>8</u> in. to <u>25</u> 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 <u>(10) Monitoring well</u>			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>(X)</u> ; If yes, mo/day/yr sample was submitted _____		Water Well Disinfected? Yes _____ No <u>(X)</u>			
[5] TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____	
<u>(2) PVC</u> 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded _____ Threaded <u>X</u>	
Blank casing diameter <u>2</u> in. to <u>0-15</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height above land surface <u>Flush</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>Schd. 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		10 Asbestos-cement			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		11 Other (specify) _____ 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot <u>(3) Mill slot</u>		5 Gauzed wrapped 8 Saw cut 11 None (open hole)		9 Drilled holes	
2 Louvered shutter 4 Key punched		6 Wire wrapped 7 Torch cut		10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>15</u> ft. to <u>25</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>13</u> ft. to <u>25</u> ft., From _____ ft. to _____ ft.					
[6] GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>(3) Bentonite</u> 4 Other _____					
Grout Intervals: From <u>0</u> ft. to <u>13</u> 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		15 Oil well/Gas well	
2 Sewer lines 5 Cess pool 8 Sewage lagoon		11 Fuel storage 12 Fertilizer storage		<u>(6) Other (specify below)</u> <u>Former CST Basin</u>	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard		13 Insecticide storage		How many feet? <u>50</u>	
Direction from well? <u>3</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>3</u>	<u>Sand + Gravel; dark gray</u>			
<u>3</u>	<u>10</u>	<u>No Data</u>			
<u>10</u>	<u>25</u>	<u>Sand: light brown, fine to coarse</u>			
[7] CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8-29-02</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>411</u> . This Water Well Record was completed on (mo/day/yr) <u>9-11-02</u> under the business name of <u>Terracon</u> by (signature) <u>Steve Fisher</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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					