

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: SEDGWICK		SE 1/4 SE 1/4 SE 1/4	33	T27S	R1E EW

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

Backyard (by garage door) 2342 S. Ellis Wichita KS 67211

2	WATER WELL OWNER:	RR #, St. Address, Box #:	Board of Agriculture, Division of Water Resources
		City, State, ZIP Code :	Application Number:
		Wichita KS 67211	Unknown

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 24 ft.
		WELL'S STATIC WATER LEVEL 18 ft.	
		WELL WAS USED AS:	
		1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supply 6 Oil Field Water Supply 7 <u>Domestic (Lawn & Garden)</u> 8 Air Conditioning
		9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other	
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:
1 Steel X 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter 1 1/4 in. Was casing pulled? Yes X No If yes, how much 4 ft Casing height above or below land surface 4.8 in.	

6	GROUT PLUG MATERIAL:	1 Neat cement	2 <u>Cement grout</u>	3 Bentonite	4 Other
Grout Plug Intervals: From 7 ft. to 2 ft., From ft. to ft., From to ft.					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit 11 Fuel storage 12 Fertilizer storage 2 Sewer lines 7 Pit privy 13 Insecticide storage 3 Watertight sewer lines 8 Sewage lagoon 14 Abandoned water well 4 Lateral lines 9 Feedyard 15 Oil well/Gas well 5 Cess pool 10 Livestock pens					
Direction from well? How many feet?					

FROM	TO	PLUGGING MATERIALS
2	0	Topsoil
7	2	Cement
24	7	Sand/bleach

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/17/89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 620 This Water Well Record was completed on (mo/day/year) 5/17/89 under the business name of Enterprise by (signature) [Signature]
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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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.