

1 LOCATION OF WATER WELL:	Fraction NW ¼ NW ¼ SE ¼	Section Number 25	Township Number 27S	Range Number 1 E																																				
County: Sedgwick																																								
Distance and direction from nearest town or city street address of well if located within city? 5701 East Lincoln, Wichita, Kansas																																								
2 WATER WELL OWNER: Town and Country Markets		01948037 MW-4																																						
RR#, St. Address, Box # PO Box 17087		Board of Agriculture, Division of Water Resources																																						
City, State, ZIP Code : Wichita, Kansas 67217		Application Number:																																						
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 22 ft.																																						
<div style="text-align: center;"> </div>		WELL'S STATIC WATER LEVEL _____ ft.																																						
		WELL WAS USED AS:																																						
		<table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><u>10 Monitoring Well</u></td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other _____</td> </tr> </table>			1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<u>10 Monitoring Well</u>	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other _____																								
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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:																																								
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Blank casing diameter 2 in. Was casing pulled? Yes ___ No <u>X</u> If yes, how much _____																																								
Casing height above or below land surface -3 in.																																								
6 GROUT PLUG MATERIAL: <u>1 Neat cement</u> 2 Cement grout 3 Bentonite 4 Other _____																																								
Grout Plug Intervals From 0 ft. to 8 ft. From 8 ft. to 10 ft. From _____ ft. to _____ ft.																																								
What is the nearest source of possible contamination:																																								
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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/yr) 1/21/2005 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 416 This Water Well Record was completed on (mo/day/yr) 1/26/2005 under the business name of Terracon Consultants, Inc.																																								
by (signature)																																								
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																								