

1 LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
County: Sedgwick SE $\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$	30	27	1-East

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

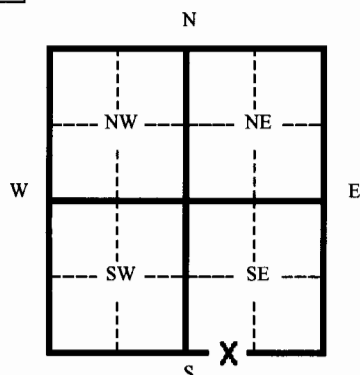
1624 W. Harry, Wichita, Kansas2 WATER WELL OWNER: **Richard Ott**RR#, St. Address, Box # **1617 W. Harry**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code : **Wichita, Kansas 67213**

Application Number:

3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL **20.0** ft.WELL'S STATIC WATER LEVEL **Dry** ft.

WELL WAS USED AS:

- | | | |
|--------------|------------------------------|--------------------|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well |
| 3 Feedlot | 7 Lawn and Garden (domestic) | 11 Injection Well |
| 4 Industrial | 8 Air Conditioning | 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 ___ No **X**

5 TYPE OF BLANK CASING USED:

- | | | | | |
|---------|------------|-----------|--------------|-------------------------|
| 1 Steel | 3 RMP (SR) | 5 Wrought | 7 Fiberglass | 9 Other (specify below) |
|---------|------------|-----------|--------------|-------------------------|

- | | | | |
|-------|-------|-------------------|-----------------|
| 2 PVC | 4 ABC | 6 Asbestos-Cement | 8 Concrete Tile |
|-------|-------|-------------------|-----------------|

Blank casing diameter **2.375** in. Was casing pulled? Yes **X** No ___ If yes, how much? _____Casing height above or below land surface **Unknown** in.**Well overdrilled to 20'**6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** **4 Other** **Soils**Grout Plug Intervals From **20.0** ft. to **3.0** ft. From **3.0** ft. to **0.0** ft. From ___ ft. to ___ ft.

What is the nearest source of possible contamination:

- | | | | |
|--------------------------|-------------------|--------------------------|--------------------------|
| 1 Septic tank | 6 Seepage pit | 11 Fuel storage (former) | 16 Other (specify below) |
| 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 | |

Direction from well? **West-northwest**How many feet? **320**

FROM	TO	CODE	PLUGGING MATERIALS
0.0	3.0		Compacted soils
3.0	20.0		Bentonite chips

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **06/21/05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **692** This Water Well Record was completed on (mo/day/yr) **06/27/05** Under the business name of **Quad State Services, Inc.** by (signature) *[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.