

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		NE ¼ NE ¼ SE ¼		22		T 27 S		R 01 E	
Distance and direction from nearest town or city street address of well if located within city? 3001 E. Douglas, Wichita									
2 WATER WELL OWNER:		Wayman Bros. Conoco							
RR#, St. Address, Box # :		6199 S. Oliver							
City, State, ZIP Code :		Derby, KS 67037							
		Board of Agriculture, Division of Water Resources Application Number:							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 31 ft. ELEVATION: 1305.74 (TOC)							
		Depth(s) Groundwater Encountered 1 24.5 ft. 2 _____ ft. 3 _____ ft.							
		WELL'S STATIC WATER LEVEL 21.78 ft. below land surface measured on mo/day/yr 12-05-05							
		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 8.5 in. to 31 ft. and _____ in. to _____ ft.							
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
		2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well							
		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:		5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____							
1 Steel 3 RMP (SR)		6 Asbestos-Cement 9 Other (specify below) Welded _____							
2 PVC 4 ABS		7 Fiberglass _____ Threaded Flush							
Blank casing diameter 2 in. to 16 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface Flushmount in., weight 0.703 lbs./ft. Wall thickness or gauge No. Sch. 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement							
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____		2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)							
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes		2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____							
SCREEN-PERFORATED INTERVALS: From 16 ft. to 31 ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 14 ft. to 31 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____									
Grout Intervals From 0.5 ft. to 14 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well							
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well		2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)							
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage									
Direction from well? _____ How many feet? _____									
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			
0	0.5		Concrete						
0.5	4.5	CH	Clay, high plasticity, med stiff, dark brown						
4.5	10	CH	Silty Clay, mod to high plasticity, soft, light red brown						
10	11.5	CH	Clay some silt, high plasticity, stiff, dark brown						
11.5	14	CH	Silty Clay, high plasticity, med stiff, red brown						
14	19.5	CH	Silty Clay, mod to high plasticity, soft, gray brown						
19.5	31	SW	Sand with some gravel, med to coarse grain						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 12-05-05 and this record is true to the best of my knowledge and belief, Kansas									
Water Well Contractor's License No. 531		This Water Well Record was completed on (mo/day/yr) 1-20-06							
under the business name of Geotechnical Services, Inc.		by (signature) <i>[Signature]</i>							
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 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									

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