

1 LOCATION OF WATER WELL:		Fraction NW ¼ SE ¼ NW ¼		Section Number 28	Township Number T 27 S	Range Number R 1 E
County: Sedgwick						
Distance and direction from nearest town or city street address of well if located within city? 1202 S Washington Wichita, Kansas 67211						
2 WATER WELL OWNER: Stewart Enterprises						
RR#, St. Address, Box # : 1202 S Washington				Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Wichita, Kansas 67211				Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 25.0 ft. ELEVATION:				
		Depth(s) Groundwater Encountered 1 17.0 ft. 2 ft. 3 ft. WELL'S STATIC WATER LEVEL 17.50 ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter 8.5 in. to 25.0 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:				
		1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) _____ 2 PVC 4 ABS 7 Fiberglass _____ Blank casing diameter 2.0 in. to 10 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height above land surface Flush Mount in., weight _____ lbs./ft. Wall thickness or gauge No. Schedule 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 25.0 ft. to 10.0 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 25.0 ft. to 9.0 ft. From _____ ft. to _____ ft.				
		6 GROUT MATERIAL:				
		Grout Intervals From 1.0 ft. to 3.0 ft. From 3.0 ft. to 9.0 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage (former) 15 Oil well/ Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____ 13 Insecticide storage Direction from well? NA How many feet? 0				
FROM		TO		CODE		
0.0		2.0		Dark brown silty clay firm		
2.0		9.0		Dark Brown silty clay, firm, stiff		
9.0		18.0		Light gray sand, fine grain		
18.0		23.0		Light brown sand medium coarse grain		
23.0		25.0		Light brown sand fine grain		
Boring terminated @ 25.0						
Flush-mount well completion waiver existent for site.						
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) 3/20/08 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) 3/20/08 under the business name of Quad State Services, 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 66612-1367. Telephone: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.						

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