1 LOCATIO	ON OF WATE	R WELL:	Fraction			Section	n Number	Townsl	nip Number	Rang	ge Numbe	er
County:	Sed	awick	NE 1/4	NE ¼	NE 1/4		8	Т	<b>27</b> s	R	1	E
Distance and	d direction from	m nearest	town or city street ad					· · · · · · · · · · · · · · · · · · ·	<u>~</u>			ــــــــــــــــــــــــــــــــــــــ
21 <sup>st</sup> and !	Broadway,	Wichita				,						
			of Wichita						***			
			N. Main St., MS	1_13				Doord of	A aria ultuma Di	vision of M/	otor Doos	
			hita, KS 67202						Agriculture, Di	VISION OF VV	ater Reso	urces
City, State, A	WELL'S LOC	ATONIA	IIIIa, NO 01202					Applicati	on Number:			
3 LOCATE AN "X" IN	N SECTION B	OX:	DEPTH OF C	OMPLETED WE	LL	20	ft. ELEV	ATION:				
<b>A</b>	1	X		water Encountere	 nd 1	14	-1	2	4	2		4
	NW	- NE	WELL'S STATIC									
<u>e</u>		_ i	Pump	test data: Wel	I water was		ft	after	hours	pumping		gpm
₹ w -		-	Est. Yield	gpm: Wel	l water was		ft	. after	hours	pumping		gpm
		1	Bore Hole Diame	eter 10 i	n. to	20		ft. and		in. to		ft.
<b>├</b>	sw <b>-</b>	- SE	WELL WATER T	O BE USED AS:								
	į <b>I</b>	į l	1 Domestic		6 Oil field	water su	oply	9 Dewa	ering	12 Other	Specify b	elow)
<b>У</b>	<u>-</u> -		2 Irrigation	4 Industrial	7 Lawn a	nd garden	(domestic	) 10 Mon	toring well	Soil Vapo	or Extrac	tion
	S		Was a chemical/	bacteriological sa	mple submit	ted to De	partment?	Yes I	No X If ye	s, mo/day/y	r sample	was
			submitted						fected? Yes			
5 TYPE OF	F BLANK CAS	SING USE	D·	5 Wrought Iro	n 8	Concrete						
1 Ste			AD (CD)	6 Ashastas C	Soment O	Other (er	anifer halas	\			Clamped	
	·		MP (SR)	6 Asbestos-C	ement 9	Other (sp	becity below	w) r		lded		
2 PV		4 AI		7 Fiberglass					Thre	aded	Flush	
Blank casing	g diameter	4	in. to 10	ft., Dia		in. to		ft., Dia		in. to		ft.
			0	in., weight	0.70	3	lbs./ft.	Wall thickne	ss or gauge N	o. S	CH. 40	)
			TION MATERIAL:	,g		7 P\	/C	10	Asbestos-cen	nent		
1 Ste		3 54	ainless steel	5 Eiberglass		8 P	MD (SD)	10	Other (enecify	Λ		
2 Bra		4 G	ainless steel alvanized steel	6 Concrete til	lo	0 10	vir (SK)	11	Other (specify None used (o	non holo)		
			NINGS ARE:	6 Concrete til	Gauzed wra	oppod	55	9 Saw ar				
									t .	11 None	e (open no	sie)
	ntinuous slot		3 Mill slot		Wire wrapp							
2 Lou	vered shutter	•	4 Key punched		Torch cut			10 Other	specify)		<b>-</b>	
SCREEN-PI	ERFORATED	INTERV	ALS: From	10 ft. to		20	ft. F	rom	ft	. to		ft.
				ft. to								
GRA	AVEL PACK II	NTERVAL		8 ft. to								
			From				ft. F			. to		
6 CDOUT	MATERIAL.	4 1	eat cement 2	0		0 D4	-14-	4.045				- 11.
	MATERIAL:	1 10	eat cement 2	Cement grout		3 Bentor	lite	4 Other				
			ft. to <b>8</b>	ft. From		ft. to		ft. Fr	om	ft. to		ft.
What is the	nearest sourc	e of possi	ble contamination:				10 Livest	lock pens	14 A	bandoned	water well	1
1 Sep	otic tank		4 Lateral lines	7 P	it privy		11 Fuels	storage	15 C	il well/ Gas	well	
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage								16 C	Other (speci	fy below)		
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage									-	,		
Direction fro	•				•		low many					
FROM	ТО	CODE	LITHOL	OGIC LOG	F	ROM	TO		PLUGGING	INTERVAL	s	
0.0	0.3		Asphalt									
0.3	0.6		Fill, Rock									
0.6	2.5	CL	Fill, Clay, dark b	rown, sandv								
			Fill, Clayey Sar		1.							
2.5	4.0	sc	medium grained	,	,							
	,		Sand, poorly gra	ded, brown ver	rv							
4.0	6.0	SP	fined grained	,,,, , , , , , , , , , , ,	,							
		1	Silty Sand, light	brown, very fir	ne to							
6.0	10.0	SM	fine grained	,,,								
			Clay, gray, very s	ilty, very fine s	and							
10.0	20.0	CL	below 18'	.,,,								
		<del>-</del> -									-	
7 CONTRA	ACTOR'S OP		I NER'S CERTIFICAT	ION: This water	well was (1)	constructo	d (2) roco	netructed or	/3\ plucaed ···	der my jurio	diction on	d was
					well was (1)							
	on (mo/day/yr)		01/1	. <b></b>		•			st of my knowl	•		
Water Well	Contractor's L	icense N	D.	531		This Wa	ter Well Re	ecoret was co	mysteted on (m	no/day/yr)	01/28	/10
	usiness name		Geotechnic	cal Services	Inc.	by (s	signature)./	/m/1.	ly			
INSTRI	UCTIONS: PIE	ease fill in I	planks and circle the cor	rect answers. Send	d three copies	to Kansas	Departmer	it of Health an			ater, 1000	SW
Jackso	n St., Ste. 420,	Topeka, K	ansas 66612-1367. Tel	ephone: 913-296-5	5545. Send o	ne to WAT	ER WELL (	OWNER and t	etain one for yo	ur records.		