

MW #8

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Sedgwick</b>	1/4      1/4 <b>SE</b> 1/4	<b>4</b>	T <b>27</b> S	R <b>1</b> E/W

Distance and direction from nearest town or city street address of well if located within city?  
**710' east and 40' north of 21st & Cleveland, Wichita, Kansas**

2 WATER WELL OWNER: **Derby Refining Company**  
 RR#, St. Address, Box # : **1100 East 21st Street**  
 City, State, ZIP Code : **Wichita, Kansas 67214**  
 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: **28** ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 1. **12** ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr  
 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: **10** in. to **28** ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS:  
 5 Public water supply      8 Air conditioning      11 Injection well  
 1 Domestic      3 Feedlot      6 Oil field water supply      9 Dewatering      12 Other (Specify below)  
 2 Irrigation      4 Industrial      7 Lawn and garden only       Observation 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)      5 Wrought iron      8 Concrete tile      CASING JOINTS: Glued **X** Clamped .....  
 PVC      4 ABS      6 Asbestos-Cement      9 Other (specify below)      Welded .....  
 7 Fiberglass      Threaded .....  
 Blank casing diameter ..... **6** in. to **18** ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface ..... **0** in., weight ..... lbs./ft. Wall thickness or gauge No. **160 psi**  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 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       Mill slot      6 Wire wrapped      9 Drilled holes  
 2 Louvered shutter      4 Key punched      7 Torch cut      10 Other (specify) .....  
 SCREEN-PERFORATED INTERVALS: From ..... **18** ft. to **28** ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From ..... **10** ft. to **28** ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement       Cement grout      3 Bentonite      4 Other .....  
 Grout Intervals: From ..... **0** ft. to **10** ft., From ..... ft. to ..... 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       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? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	12	Gray to brown silty clay			
12	28	Fine-medium grained slightly silty sand			

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/year) ..... **6-28-84** ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... **415** ..... This Water Well Record was completed on (mo/day/yr) .....  
 under the business name of **Daniels Drilling Company** by (signature) *Daniel Daniels*

INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
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