1 LOCATION OF WATER WELL:	Fraction Fraction	Se	ection Number	Township Number	Range Number
County: Sedgwick	NW 1/4 NE 1/4		4	T 27 S	R / (F)W
Distance and direction from nearest town or city street address of well if located within city? 15/5 E 29 Vorth Wich.					
2 WATER WELL OWNER: WNID - Robert S. Wise Co. WND-14 Shalker					
RR#, St. Address, Box # :	15 15 E	=, 29el St	, North	Board of Agriculture,	Division of Water Resources
City, State, ZIP Code :	Wichit		7219	Application Number:	
3 LOCATE WELL'S LOCATION WITH 4 AN "X" IN SECTION BOX:	DEPTH OF COMPLETED Wepth(s) Groundwater Encounte				
	ELL'S STATIC WATER LEVE				
					umping gpm
NW NE Es	st. Yield gpm:_ W	ell water was	ft. aff	ter hours p	umping gpm
w I E Bo	ore Hole Diameter	≨n. to	?. ft., a	ınd	n. to
W I I BOW	ELL WATER TO BE USED A	S: 5 Public wat	er supply	8 Air conditioning 11	Injection well
	1 Domestic 3 Feedlo				Other (Specify below)
	2 Irrigation 4 Industr			0 Monitoring web	
1	as a chemical/bacteriological s tted	ample submitted to [sNo	s, mo/day/yr sample was sub- No X
5 TYPE OF BLANK CASING USED:	5 Wrought iro	on 8 Conc			ed Clamped
1 Steel 3 RMP (SR)	6 Asbestos-C	ement 9 Other	(specify below) Wel	ded
PVC 4 ABS	7 Fiberglass			Thre	eaded X
Blank casing diameter in.					. in. to ft.
Casing height above land surface		0.7	lbs./ft	t. Wall thickness or gauge I	No 5 . 4 . 9
TYPE OF SCREEN OR PERFORATION N	MATERIAL:	€ PI	7 0	10 Asbestos-cem	ent
1 Steel 3 Stainless st			MP (SR)	11 Other (specify	·) · · · · · · · · · · · · · · · _
2 Brass 4 Galvanized		e 9 Al	38	12 None used (o	pen hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)					
1 Continuous slot 3 Mill slot 0, 0/ 6 Wire wrapped 9 Drilled holes					
		7 Torch cut			
SCREEN-PERFORATED INTERVALS:					toft.
GRAVEL PACK INTERVALS:	From. 22				toft.
GIAVEE FACK INTERIORES.	_	ft. to	ft., From ft., From	_	
6 GROUT MATERIAL: 1 Neat cem					
	to Surfee ft., From				
What is the nearest source of possible cor			10 Livesto		Abandoned water well
1 Septic tank 4 Lateral li	ines 7 Pit pi	rivv	11 Fuel s		Dil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage			12 Fertilizer storage 16 Other (specify below)		í _
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide stora			-	Other (specify below)	
Direction from well?		-	How many	O 1	
	LITHOLOGIC LOG	FROM	TO	PLUGGING	INTERVALS
0 3 Silty C	LAY				WILLIAM OF THE PROPERTY OF THE
3 /3 Sandy 6	LAY AND			grout Val	rience
	AND			grow ted	
15 22+ 50/kg 5	ANU		 		
	THE SECOND SECON				
			 		
			ļ		
			 		
			 		%
				wer care	
			 		
	W		1		
7 00170107070	0-0-1-0		┷		
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) 3-28-9/					
and this record to the best of the first the best of t					
Water Well Contractor's License No. 5.7.	This W	ater Well Record wa	•	- ' ' //// K'	6.7
under the business name of Noundwall Sicknology by (signature) Cilled Stant					
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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					