			WAT		Form WWC-	5 KSA 82a	-1212		
1 LOCATI		TER WELL:	Fraction	SW NW SW NE	Se	ction Number	Township Numb		
County:	Sedgr			4 360 14 RW	1/4	5	T 27	S R I E EM	
Distance a	and direction	from nearest to	•	address of well if located	within city?			•	
2710	North A	ckansas	Wichita	Kansas					
2 WATE	R WELL OV	/NER:	Kansas (	Concrete					
RR#, St.	Address, Bo	x # :	2710 No	rth Arkansas		Board of Agriculture, Division of Water Resources			
City, State	, ZIP Code	:	Wichita	, Kansas		Application Number:			
i LOCAT	IN SECTIO		Depth(s) Ground WELL'S STATI	dwater Encountered 1. C WATER LEVEL	15 <sub>ft.</sub>	'ft. 2 below land sur	c	ft. 3	
	Υ ή Τ	NE	Est. Yield	gpm: Well water	was	ft. a	fter ho	ours pumping gpm	
* w	1	E					and	in. toft.	
₹	:	!   [					8 Air conditioning	11 Injection well	
Ī.	SW	SE	_1_Domestic					12 Other (Specify below)	
1 1	1	Ĭ	2 Irrigation			_			
Į L			1	l/bacteriological sample s	ubmitted to [			; If yes, mo/day/yr sample was sub-	
<del>-</del>		<u> </u>	mitted				ter Well Disinfected?		
		CASING USED:		5 Wrought iron	8 Conc			S: Glued XX . Clamped	
1 St		3 RMP (S	<u>(R)</u>	6 Asbestos-Cement	9 Other	(specify below	() CDD 36	Welded	
2 P\		4 ABS	2/	7 Fiberglass	cer-	Mac styre	ne SDR-26	Threaded	
								in. to ft.	
Casing he	ight above I	and surface	12.	in., weight			ft. Wall thickness or ga	auge No • 203	
TYPE OF	SCREEN O	R PERFORATIO	N MATERIAL:		7 P		10 Asbesto	s-cement	
1 St	eel	3 Stainles	s steel	5 Fiberglass		MP (SR)	11 Other (s	specify)	
2 Br		4 Galvaniz		6 Concrete tile	9 Al			sed (open hole)	
SCREEN	OR PERFO	RATION OPENIN			d wrapped		8 Saw cut	11 None (open hole)	
1 Cc	ontinuous slo	ot 3 M	fill slot	6 Wire v	rapped		9 Drilled holes		
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From									
(	GRAVEL PA	CK INTERVALS:						. , ft. to	
			From	ft. to		ft., Fror	n	ft. to ft.	
	MATERIAL			2 Cement grout					
Grout Intervals: FromQft. toft., Fromft. toft., Fromft.									
What is th	e nearest so	ource of possible					ock pens	14 Abandoned water well	
				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 None apparent									
Direction f						How mar			
FROM	то	mana a di l	LITHOLOGIC	LOG	FROM	ТО	LITH	HOLOGIC LOG	
0	3	Topsoil				1			
3	21	Clay				1 1			
21	27	Fine Sand	_		ļ	+ +			
27	45	Medium Sa	na		ļ	1			
					<u></u>				
						-			
						1			
						<u> </u>			
							<u></u>		
7 CONT	RACTOR'S	OR LANDOWNE	R'S CERTIFICAT	TION: This water well wa	s (1) constr	ucted. (2) reco	nstructed, or (3) plugg	ed under my jurisdiction and was	
completed on (mo/day/year)									
Water Wel	Contractor	's License No.		36 This Water We	ell Record w	as completed of	on (mo/day/vr)	5-10-86	
	business na	TT	p Well & P	ump Service, In	C•		ure) Mary		
INSTRUC	CTIONS: Use t	vpewriter or ball poir	nt pen. PLEASE PRI	ESS FIRMLY and PRINT clear	ly. Please fill in	n blanks, underline	or circle the correct apew	ers. Send top three copies to Kansas	
Departme	ent of Health ar	nd Environment, Offi	ice of Oil Field and E	nvironmental Geology, Regula	ition and Perm	itting Section, Top	eka, Kansas 66620-7500,	Telephone: 913-862-9360. Send one	
to WATE	H WELL OWN	IER and retain one	for your records.						