

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>		Fraction SE 1/4 NW 1/4 SW 1/4		Section Number <u>8</u>		Township Number T <u>27</u> S		Range Number R <u>1E</u> E/W			
Distance and direction from nearest town or city street address of well if located within city? <u>1606 Payne Wichita, Kansas</u>											
2 WATER WELL OWNER: <u>Woodland Methodist Church</u> RR#, St. Address, Box # : <u>1606 Payne</u> City, State, ZIP Code : <u>Wichita, Kansas</u>					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 <u>46</u> ft. ELEVATION:								
			Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.								
			WELL'S STATIC WATER LEVEL <u>18</u> ft. below land surface measured on mo/day/yr <u>1-31-92</u>								
			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 <u>14</u> in. to <u>46</u> 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		
			2 Irrigation		4 Industrial		7 Lawn and garden only		10 Monitoring well		
			Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u> ; If yes, mo/day/yr sample was submitted								
			Water Well Disinfected? Yes No <u>X</u>								
5 TYPE OF BLANK CASING USED:											
1 Steel			3 RMP (SR)			5 Wrought iron			8 Concrete tile		
2 PVC			160 PSI 4 ABS			6 Asbestos-Cement			9 Other (specify below)		
			8			7 Fiberglass			SDR-26		
Blank casing diameter in. to <u>26</u> ft., Dia			in. to ft., Dia			in. to ft., Dia			in. to ft.		
Casing height above land surface <u>12</u> in., weight <u>5.59</u> lbs./ft.			Wall thickness or gauge No. <u>332</u>								
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel			3 Stainless steel			5 Fiberglass			7 PVC		
2 Brass			4 Galvanized steel			6 Concrete tile			8 RMP (SR)		
									10 Asbestos-cement		
									11 Other (specify)		
									12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot			3 Mill slot			5 Gauzed wrapped			8 Saw cut		
2 Louvered shutter			4 Key punched			6 Wire wrapped			9 Drilled holes		
			<u>26</u>			<u>46</u>			10 Other (specify)		
SCREEN-PERFORATED INTERVALS:											
From ft. to ft.			From ft. to ft.			From ft. to ft.			From ft. to ft.		
GRAVEL PACK INTERVALS:											
From <u>24</u> ft. to <u>46</u> ft.			From ft. to ft.			From ft. to ft.			From ft. to ft.		
6 GROUT MATERIAL:											
1 Neat cement			2 Cement grout			3 Bentonite			4 Other		
Grout Intervals: From <u>4</u> ft. to <u>24</u> ft.			From ft. to 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		
2 Sewer lines			5 Cess pool			8 Sewage lagoon			11 Fuel storage		
3 Watertight sewer lines			6 Seepage pit			9 Feedyard			12 Fertilizer storage		
									13 Insecticide storage		
									14 Abandoned water well		
									15 Oil well/Gas well		
									16 Other (specify below)		
Direction from well? <u>SE</u>									How many feet? <u>55</u>		
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		3		Topsoil							
3		7		Clay - Black							
7		13		Sandy Clay							
13		25		Medium to Coarse Sand							
25		40		Coarse Sand and Gravel							
40		45		Medium to Coarse Sand and Gravel							
45		46		Shale							
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) <u>1-31-92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>236</u> This Water Well Record was completed on (mo/day/yr) <u>2-19-92</u> under the business name of <u>Harp Well and Pump Service, Inc.</u> by (signature) <u>Mary Arnold</u>											
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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.											