

Copy - ob

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		NW 1/4 NE 1/4 NE 1/4		9		T 27 S		R 1E E/W	
Distance and direction from nearest town or city? NE part of Wichita, Kansas				Street address of well if located within city? 1100 E. 21st Street				Well #L	
2 WATER WELL OWNER: Derby Refining Company		Board of Agriculture, Division of Water Resources							
RR#, St. Address, Box # : 1100 E. 21st Street		Application Number:							
City, State, ZIP Code : Wichita, KS 67214									
3 DEPTH OF COMPLETED WELL... 25... ft.		Bore Hole Diameter... 8... in.		to... 25... 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		X10 Observation well					
Well's static water level... 13... ft.		below land surface measured on... 6... month		2... day		81... year			
Pump Test Data		Well water was... ft. after		hours pumping...		gpm			
Est. Yield gpm:		Well water was... ft. after		hours pumping...		gpm			
4 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		Casing Joints: Glued		Clamped	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)		Welded	
2 PVC		4 ABS		7 Fiberglass				Threaded	
Blank casing dia... 4... in.		to... 10... ft.		Dia... in.		to... ft.		Dia... in.	
Casing height above land surface... 30... in.		weight... lbs./ft.		Wall thickness or gauge No... 200					
TYPE OF SCREEN OR PERFORATION MATERIAL:		X7 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		X8 Saw cut		11 None (open hole)			
1 Continuous slot		3 Mill slot		6 Wire wrapped		9 Drilled holes			
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify)			
Screen-Perforation Dia... 4... in.		to... 25... ft.		Dia... in.		to... ft.		Dia... in.	
Screen-Perforated Intervals:		From... 10... ft.		to... 25... ft.		From... ft.		to... ft.	
Gravel Pack Intervals:		From... 10... ft.		to... 25... ft.		From... ft.		to... ft.	
5 GROUT MATERIAL:		1 Neat cement		X2 Cement grout		3 Bentonite		4 Other	
Grouted Intervals: From... 0... ft.		to... 10... ft.		From... ft.		to... ft.		From... ft.	
What is the nearest source of possible contamination:		10 Fuel storage		14 Abandoned water well					
1 Septic tank		4 Cess pool		7 Sewage lagoon		11 Fertilizer storage		15 Oil well/Gas well	
2 Sewer lines		5 Seepage pit		8 Feed yard		12 Insecticide storage		X16 Other (specify below)	
3 Lateral lines		6 Pit privy		9 Livestock pens		13 Watertight sewer lines		Hydrocarbon on H ₂ O	
Direction from well... ALL		How many feet... 0		Water Well Disinfected? Yes		No		X	
Was a chemical/bacteriological sample submitted to Department? Yes		No		X		If yes, date sample			
was submitted... month... day... year		Pump Installed? Yes		No		X			
If Yes: Pump Manufacturer's name		Model No.		HP		Volts			
Depth of Pump Intake... ft.		Pumps Capacity rated at... gal./min.							
Type of pump:		1 Submersible		2 Turbine		3 Jet		4 Centrifugal	
		5 Reciprocating		6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on... 6... month... 2... day... 81... year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No... 415-B									
This Water Well Record was completed on... 12... month... 8... day... 81... year									
name of Daniels Drilling Company									
by (signature) Daniel W. Daniels									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG					
		0.0 4.0 Silty Sand							
		4.0 18.0 Silty Clay							
		18.0 25.0 Sand							
ELEVATION:									
Depth(s) Groundwater Encountered 1... 13... ft. 2... ft. 3... ft. 4... ft.									
(Use a second sheet if needed)									
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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									