

Copy - 06

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																											
County: SEDGWICK		SE 1/4 NW 1/4 NE 1/4		9		T 27 S		R 1E E/W																																											
Distance and direction from nearest town or city street address of well if located within city?																																																			
74 FEET WEST OF INDIANA AND 250 FEET SOUTH OF 20th STREET						WELL #T-7																																													
2 WATER WELL OWNER: DERBY REFINING COMPANY																																																			
RR#, St. Address, Box #: P. O. BOX 1030																																																			
City, State, ZIP Code: WICHITA, KANSAS 67201																																																			
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: 25 ft. ELEVATION:																																																	
		Depth(s) Groundwater Encountered 1. 14.0 ft. 2. _____ ft. 3. _____ ft.																																																	
		WELL'S STATIC WATER LEVEL: 14.0 ft. below land surface measured on mo/day/yr 2-28-83																																																	
		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: 8 in. to 25 in. and _____ in. to _____ in.																																																	
WELL WATER TO BE USED AS:																																																			
1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)																																																			
2 Irrigation 4 Industrial 7 Lawn and garden only 10 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 _____ X 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____																																																			
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																																																			
Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. _____																																																			
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole)																																																			
SCREEN OR PERFORATION OPENINGS ARE:																																																			
1 Continuous slot 3 Mill slot 5 Gauzed wrapped X 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____																																																			
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																			
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																			
6 GROUT MATERIAL: 1 Neat cement X 2 Cement grout 3 Bentonite 4 Other _____																																																			
Grout Intervals: 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 14 Abandoned water well X 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 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? WEST How many feet? 100																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0.0</td> <td>6.4</td> <td>SILTY CLAY WITH TRASH FILL</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6.4</td> <td>11.4</td> <td>SILTY CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>11.4</td> <td>13.8</td> <td>SANDY CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>13.8</td> <td>15.8</td> <td>SANDY SILT</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15.8</td> <td>25.0</td> <td>SAND</td> <td></td> <td></td> <td></td> </tr> <tr> <td>25.0</td> <td></td> <td>BOTTOM OF HOLE</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0.0	6.4	SILTY CLAY WITH TRASH FILL				6.4	11.4	SILTY CLAY				11.4	13.8	SANDY CLAY				13.8	15.8	SANDY SILT				15.8	25.0	SAND				25.0		BOTTOM OF HOLE			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 10-26-82 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) 3-2-83 under the business name of DANIELS DRILLING COMPANY by (signature) _____																																																			
INSTRUCTIONS: Use typewriter or ball point pen, <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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

T

27

H

BW

SEC

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SE 1/4

NW 1/4

NE 1/4

SW 1/4

DP