

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: Sedgwick		SW 1/4 SW 1/4 SW 1/4		16		T 27 S		R 1 (E/W)			
Distance and direction from nearest town or city street address of well if located within city?											
601 N. Emporia, Wichita, Kansas					HWST Job No. 70-74-40/4031.01						
2 WATER WELL OWNER: Continental Baking Company											
RR#, St. Address, Box # : 1111 S. Sheridan					Board of Agriculture, Division of Water Resources						
City, State, ZIP Code : Tulsa, OK 74122					Application Number:						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 22.0 ft. ELEVATION: unknown									
		Depth(s) Groundwater Encountered 12 ft. 2. ft. 3. ft.									
		WELL'S STATIC WATER LEVEL 12.0 ft. below land surface measured on mo/day/yr 9/17/90									
		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 4.5 in. to 22.9 in. and _____ in. to _____ ft.									
		WELL WATER TO BE USED AS:									
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well 12 Other (Specify below)									
		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 _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 3 Fiberglass Threaded X _____											
Blank casing diameter 2 " in. to 12 " ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.											
Casing height above land surface flush in., weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40											
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 2 Mill slot 5 Gauzed wrapped 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 12.0 ft. to 22.0 ft., From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From 10.0 ft. to 22.0 ft., From _____ ft. to _____ ft.											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Bentonite Grout											
Grout Intervals: From 1 ft. to 8.0 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 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 excavated UST _____											
Direction from well? East How many feet? 30											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		.6		Asphalt						fine to coarse 0-5% gravels, Saturated	
.6		2.0		Silty Clay - dark brown, 5-15% fine sand, wet							
2.0		4.0		Silty Clay - yellow brown, 0-10% very fine sand, 0-5% calcareous nodules, wet.							
5.0		5.5		Clayey Silt - light brown 10-20% very fine sand, wet.							
5.5		8.0		Silty Clay - mottled light green and light brown, 0-10% very fine sand, wet.							
8.0		11.0		Silty Sand - brown, poorly sorted fine sand, wet.							
11.5		16.0		Silty Sand - light brown poorly sorted fine sand, wet.							
16.0		18.0		Sand - light brown, finewell sorted very fine to coarse sand 0-3% gravels							
18.0		22.0		Sand - light brown, coarse well sorted							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (X) constructed , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9/14/90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 471 This Water Well Record was completed on (mo/day/yr) 10/5/90 under the business name of HWS Technologies Inc. by (signature) _____											
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.											