

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		NE 1/4 SW 1/4 SW 1/4		21		T 27 S		R 1 E/W	
Distance and direction from nearest town or city street address of well if located within city? EAST									
Located behind address 401 South Emporia, Wichita, Kansas						HWST Job No.: 74-40/4013.01			

2 WATER WELL OWNER: TAP Partnership		Board of Agriculture, Division of Water Resources	
RR#, St. Address, Box #: 150 N. Main, Suite 501		Application Number:	
City, State, ZIP Code: Wichita, Kansas 67201			

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL: **22.0** ft. ELEVATION: **n/a**

Depth(s) Groundwater Encountered 1. **14.0** ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL **14.52** ft. below land surface measured on **mo/day/yr** **5/10/90**

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield **8.0** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter **6.0** in. to **22.0** ft. and _____ in. to _____ ft.

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)

Monitoring well **MW-2**

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:		5 Wrought iron		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below) _____	
2 PVC		4 ABS		7 Fiberglass		10 Asbestos-cement _____	
Blank casing diameter 2.0 in. to 12.0 ft. Dia _____ in. to _____ ft.						11 Other (specify) _____	
Casing height above land surface flush in., weight _____ lbs./ft. Wall thickness or gauge No. Sch 40						12 None used (open hole)	

TYPE OF SCREEN OR PERFORATION MATERIAL:		X PVC		10 Asbestos-cement	
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
8 RMP (SR)		9 ABS		11 Other (specify)	
12 None used (open hole)					

SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut		11 None (open hole)	
1 Continuous slot		X Mill slot		6 Wire wrapped		9 Drilled holes	
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify)	

SCREEN-PERFORATED INTERVALS:		From 22.0 ft. to 12.0 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS:		From 22.0 ft. to 12.0 ft. Natural		From 12.0 ft. to 10.0 ft. sand		From _____ ft. to _____ ft.	

6 GROUT MATERIAL:		1 Neat cement		2 Cement grout		X Bentonite		4 Other _____	
Grout Intervals: From 8.0 ft. to grade ft.		From _____ ft. to _____ 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		14 Abandoned water well	
2 Sewer lines		5 Cess pool		8 Sewage lagoon		X 1 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? North				How many feet? 6.0 ft.					

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0.0	0.5	Concrete:			
0.5	1.0	Fill: Sand:			
1.0	3.0	Sand: light brown; less than 15% fines; fine to medium sand.			
3.0	6.0	Sand: rust-brown; less than 10% fines; med. to coarse sand.			
6.0	11.0	Sand: light brown; less than 5% fines; medium to coarse sand.			
11.0	16.0	Sand: light brown; less than 10% fines; less than 5% gravel; coarse sand.			
16.0	22.0	Gravelly Sand: grayish-brown; less than 15% fines; less than 10% gravel; coarse sand.			

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) 5/9/90 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) 5/17/90 under the business name of HWS Technologies Inc. by (signature) <i>Richard L. [Signature]</i>	
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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.

OFFICE USE ONLY

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F/W

SEC.

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