

1) LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		<u>NE ¼ NW ¼ SE ¼</u>	<u>27</u>	<u>T 27 S</u>	R <u>1 E</u>
Distance and direction from nearest town or city street address of well if located within city?					
2) WATER WELL OWNER: <u>C. Edens</u>					
RR#, St. Address, Box # : <u>642 S Erie</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code <u>Wichita Kansas</u>			Application Number:		
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4) DEPTH OF COMPLETED WELL: <u>26</u> ft. ELEVATION:			
<p>A diagram showing a section box divided into four quadrants labeled NW, NE, SW, and SE. An 'X' is marked in the SE quadrant.</p>		Depth(s) Groundwater Encountered <u>1</u> ft. 2. .ft. 3. .ft.			
		WELL'S STATIC WATER LEVEL <u>999</u> ft. below land surface measured on mo/day/yr			
		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>8</u> .in. to .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 <u>7 Lawn and garden only</u> 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes..... No..... If yes, mo/day/yr sample was submitted, Water Well Disinfected? Yes..... No.....			
5) TYPE OF BLANK CASING USED:		CASING JOINTS: <u>Glued</u> Clamped Welded Threaded			
1 Steel 3 RMP (SR) <u>2 PVC</u> 4 ABS					
Blank casing diameter <u>5</u> .in. to .ft., Dia .in. to .ft., Dia .in. to .ft.					
Casing height above land surface .in., weight lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>PVC</u> 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 2 Brass 4 Galvanized steel 6 Concrete tile		8 RMP (SR) 11 Other (specify) 9 ABS 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 6 Wire wrapped <u>9 Drilled holes</u> 2 Louvered shutter 7 Torch cut 10 Other (specify) 3 Mill slot 4 Key punched			
SCREEN-PERFORATED INTERVALS:		From <u>20</u> ft. to <u>26</u> ft., From .ft. to .ft.			
GRAVEL PACK INTERVALS:		From .ft. to .ft., From .ft. to .ft.			
6) GROUT MATERIAL:		1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>clog</u> Grout Intervals: From <u>20</u> ft. to <u>0</u> 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) <u>NONE</u> Direction from well? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS <u>26</u> <u>20</u> <u>SAND</u> <u>20</u> <u>0</u> <u>CLAY</u>			
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>6-4-89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) <u>6-19-93</u> by (signature) <u>Leroy A Wisley</u> under the business name of _____					
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.					