

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		NW 1/4 NE 1/4 NW 1/4	30	T 27 S	R 1 EW
Distance and direction from nearest town or city street address of well if located within city? Approximately 25' Northeast of address 2001 W. Maple, Wichita, Kansas HWST Job No. 74-40/4006.02					
2 WATER WELL OWNER: Friends Management					
RR#, St. Address, Box # : 2005 University			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Wichita, Kansas 67213			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 20.0 ft. ELEVATION: n/a			
		Depth(s) Groundwater Encountered 1. 11.0 ft. 2. 11.0 ft. 3. 11.0 ft.			
		WELL'S STATIC WATER LEVEL 12.90 ft. below land surface measured on mo/day/yr 3/5/90			
		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 6 in. to 20.0 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 <input checked="" type="checkbox"/> Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was sub- mitted _____			
		Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<input checked="" type="checkbox"/> PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded <input checked="" type="checkbox"/>
Blank casing diameter 2 in. to 10.0 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	<input checked="" type="checkbox"/> PVC	10 Asbestos-cement
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:					
1 Continuous slot		<input checked="" type="checkbox"/> 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 10.0 ft. to 20.0 ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 20.0 ft. to 11.0(natural) ft., From 11.0 ft. to 8.0 ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout	<input checked="" type="checkbox"/> Bentonite	4 Other _____	
Grout Intervals: From 6.0 ft. to grade 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	<input checked="" type="checkbox"/> Other (specify below)
				13 Insecticide storage	Abandoned Fuel Storage (UST)
Direction from well? Southeast		How many feet? 20.0			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0.0	0.5	CONCRETE:			
0.5	1.0	FILL: SAND:			
1.0	2.0	SANDY CLAY: dark brown; less than 20% fine sand.			
2.0	3.0	SANDY CLAY: grayish-brown; less than 20% fine sand.			
3.0	5.5	SILTY SAND: light brown; less than 20% silt; well sorted fine sand.			
5.5	7.5	SAND: dark brown; less than 15% fines; medium sand.			
7.5	12.0	SAND: yellowish-brown; less than 10% fines; medium to coarse sand.			
12.0	15.5	SAND: as above except rust-brown.			
15.5	20.0	GRAVELLY SAND: gray; less than 20% fines; coarse sand with gravel.			
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) 3/2/90 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) 3/7/90 under the business name of HWS Technologies Inc. by (signature) <i>Richard L. Stone</i>					
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.					