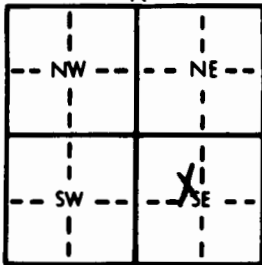


1 LOCATION OF WATER WELL: County: <u>SEDGWICK</u>		Fraction <u>SE 1/4</u> <u>NW 1/4</u> <u>SE 1/4</u>		Section Number <u>32</u>	Township Number <u>T 27 S</u>	Range Number <u>R 1 E E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2255 South Water</u> <u>Wichita, Kansas</u>						
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		<u>Evel Reed</u> <u>2255 South Water</u> <u>Wichita, Kansas 67213</u>			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: <u>40</u> ft. ELEVATION: <u>16</u> ft.				
<div style="text-align: center;"></div>		Depth(s) Groundwater Encountered 1. <u>16</u> ft. 2. <u>16</u> ft. 3. <u>16</u> ft.				
		WELL'S STATIC WATER LEVEL <u>16</u> ft. below land surface measured on mo/day/yr <u>9-2-86</u>				
		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>11</u> in. to _____ ft. and _____ in. to _____ ft.		WELL WATER TO BE USED AS:				
1 Domestic		3 Feedlot		5 Public water supply		8 Air conditioning
2 Irrigation		4 Industrial		6 Oil field water supply		9 Dewatering
				7 <u>Lawn and garden only</u>		11 Injection well
				10 Observation well		12 Other (Specify below)
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>XX</u> ; If yes, mo/day/yr sample was submitted _____						
Water Well Disinfected? Yes <u>XX</u> No _____						
5 TYPE OF BLANK CASING USED:						
1 Steel		<u>3 RMP (SR)</u>		5 Wrought iron		8 Concrete tile
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
				7 Fiberglass		<u>Cer-Mac styrene SDR-26</u>
Blank casing diameter <u>5</u> in. to _____ ft.		Dia <u>25</u> in. to _____ ft.		Dia _____ in. to _____ ft.		Dia _____ in. to _____ ft.
Casing height above land surface <u>12</u> in. weight _____ lbs./ft.		Wall thickness or gauge No. <u>203</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		<u>8 RMP (SR)</u>
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS
						10 Asbestos-cement
						11 Other (specify)
						12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		<u>9 Drilled holes</u>
				7 Torch cut		10 Other (specify)
						11 None (open hole)
SCREEN-PERFORATED INTERVALS: From <u>25</u> ft. to <u>40</u> ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>14</u> ft. to <u>40</u> ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other _____						
Grout intervals: From <u>4</u> ft. to <u>14</u> 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below)
Direction from well? <u>East</u> How many feet? <u>27</u>						
FROM		TO		LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG
0		3		Topsoil		
3		14		Clay		
14		23		Fine Sand		
23		37		Medium Sand		
37		40		Gray Shale		
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>9-2-86</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>236</u> This Water Well Record was completed on (mo/day/yr) <u>3-9-87</u> under the business name of <u>Harp Well & Pump Service, Inc.</u> by (signature) <u>Mary Arnold</u>						
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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.						