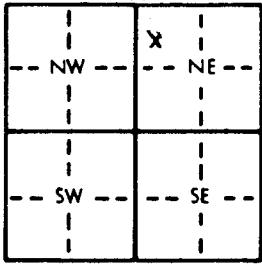


WATER WELL RECORD				Form WWC-5	KSA 82a-1212	
11 LOCATION OF WATER WELL: County: <u>Sedgwick</u> <u>087</u>		Fraction: <u>NW</u> <u>1/4</u> <u>NW</u> <u>1/4</u> <u>NE</u> <u>1/4</u>		Section Number: <u>32</u>	Township Number: <u>T 27</u> S	Range Number: <u>R 1</u> EW
Distance and direction from nearest town or city street address of well if located within city?						
12 WATER WELL OWNER: <u>Albert W. Briggs</u>		Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box #: <u>1631 S. Wichita</u>		Application Number:				
City, State, ZIP Code: <u>Wichita, Sedgwick Co., Kansas</u>						
13 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>25</u> ft. ELEVATION:				
		Depth(s) Groundwater Encountered: 1. _____ ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL: <u>12</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: _____ 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 7 <u>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? <u>Yes</u> <u>10-29-NB3</u>				
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued _____ Clamped _____				
1 Steel 3 RMP (SR)		Welded _____				
2 <u>PVC</u> 4 ABS		Threaded _____				
Blank casing diameter: <u>6</u> in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height above land surface: <u>3</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____						
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement				
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) <u>NA</u>						
2 Brass 4 Galvanized steel 6 Concrete tile 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 3 Mill slot 6 Wire wrapped 9 Drilled holes						
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) <u>NA</u>						
SCREEN-PERFORATED INTERVALS: From <u>NA</u> ft. to <u>NA</u> ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other _____						
Grout intervals: From <u>3</u> ft. to <u>4</u> ft., From _____ ft. to _____ ft.						
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well				
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well						
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)						
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage		<u>THIS WELL WAS FOR YARD PLANT WATERING, if nece</u>				
Direction from well? _____		How many feet? _____				
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
			<u>25</u>	<u>12</u> <u>05</u>	<u>SAND</u>	
			<u>12</u>	<u>4</u> <u>01</u>	<u>CLAY</u>	
			<u>4</u>	<u>3</u> <u>28</u>	<u>CEMENT</u>	
			<u>3</u>	<u>0</u> <u>01</u>	<u>CLAY</u>	
<div>RECEIVED</div> <div>NOV 05 1993</div> <div>BUREAU OF WATER</div>						
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>October 29, 1993</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>October 29, 1993</u> under the business name of _____ by (signature) <u>John T. Jackson</u>						
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers and send one 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.						