

1 LOCATION OF WATER WELL		Section Number		Township Number		Range Number	
County: <b>Sedgwick</b>		<b>30</b>		<b>T 27 S</b>		<b>R 1 E</b>	
Distance and direction from nearest town or city?				Street address of well if located within city?			
<b>in city</b>				<b>1331 So St. Clair EAST</b>			
2 WATER WELL OWNER: <b>Richard Dugas</b>							
RR#, St. Address, Box #: <b>1331 So. St. Clair</b>							
City, State, ZIP Code: <b>Wichita Kans.</b>							
Board of Agriculture, Division of Water Resources							
Application Number:							
3 DEPTH OF COMPLETED WELL: <b>30</b> ft. Bore Hole Diameter: <b>8</b> in. to . . . ft., and . . . in. to . . . ft.							
Well Water to be used as:							
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well							
2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
7 <u>Lawn and garden only</u> 10 Observation well							
Well's static water level: <b>16</b> ft. below land surface measured on <b>4</b> month <b>20</b> day <b>81</b> year							
Pump Test Data							
Est. Yield gpm: Well water was . . . ft. after . . . hours pumping. . . gpm							
Well water was . . . ft. after . . . hours pumping. . . gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued <input checked="" type="checkbox"/> Clamped . . .							
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded . . .							
7 Fiberglass Threaded. . .							
Blank casing dia <b>5</b> in. to <b>25</b> ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.							
Casing height above land surface: <b>12</b> in., weight <b>200</b> lbs./ft. Wall thickness or gauge No. <b>14</b>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless steel 5 Fiberglass 7 <u>PVC</u> 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 3 Mill slot 5 Gauzed wrapped 8 <u>Saw cut</u> 11 None (open hole)							
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes							
7 Torch cut 10 Other (specify) . . .							
Screen-Perforation Dia. <b>5</b> in. to <b>30</b> ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.							
Screen-Perforated Intervals: From <b>25</b> ft. to <b>30</b> ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.							
Gravel Pack Intervals: From . . . ft. to . . . ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.							
5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other . . .							
Grouted Intervals: From <b>0</b> ft. to <b>10</b> ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.							
What is the nearest source of possible contamination:							
1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well							
2 <u>Sewer lines sealed</u> 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well							
3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)							
13 Watertight sewer lines							
Direction from well: <b>South</b> How many feet: <b>10</b> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No							
Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date sample							
was submitted . . . month . . . day . . . year: Pump Installed? Yes <input checked="" type="checkbox"/> No							
If Yes: Pump Manufacturer's name: <b>Goold</b> Model No. . . HP . . . Volts . . .							
Depth of Pump Intake . . . ft. Pumps Capacity rated at . . . gal./min.							
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was							
completed on <b>4</b> month <b>21</b> day <b>81</b> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>313</b>							
This Water Well Record was completed on <b>4</b> month <b>30</b> day <b>81</b> year under the business							
name of <b>Jet Drilling</b> by (signature) <b>Walter Anderson</b>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG			
		0 10 brn dirt					
		10 16 brn SAND					
		16 30 wht. SAND/gravel					
ELEVATION:							
Depth(s) Groundwater Encountered 1. <b>16</b> ft. 2. . . ft. 3. . . ft. 4. . . ft. (Use a second sheet if needed)							
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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.							