

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		$\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$	13	T 27 S	R 2 E
Distance and direction from nearest town or city street address of well if located within city? 14425 E. 9th Street Wichita, KS 67220					
2 WATER WELL OWNER: Mark Jackson RR#, St. Address, Box # : 8226 Greenbriar Ct. City, State, ZIP Code : Wichita, KS 67226			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: 75 ft. ELEVATION: _____ ft.			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL 15 ft. below land surface measured on mo/day/yr 8/16/97			
		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 .9 in. to .75 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 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes X No			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued X Clamped	
② PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded _____	
		7 Fiberglass		Threaded _____	
Blank casing diameter 5 in. to 40 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. SDR26					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass		⑦ PVC 8 RMP (SR)		10 Asbestos-cement	
2 Brass 4 Galvanized steel 6 Concrete tile		9 ABS		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		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 40 ft. to 75 ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 75 ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout ③ Bentonite 4 Other _____					
Grout Intervals: From 4 ft. to 20 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)			
		13 Insecticide storage			
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	25	Clay			
25	35	Shale			
35	45	Lime			
45	65	Shale			
65	75	Cherty Lime			
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) 8/16/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 171 This Water Well Record was completed on (mo/day/yr) 8/20/97 under the business name of G & S Drilling, Inc. by (signature) Timothy J. Brandt					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answer. Send two 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.					