

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Jedgwick</u>		C ¼ NE ¼ SW ¼	13	T 27 S	R 2E EW
Distance and direction from nearest town or city street address of well if located within city? <u>14700 Sundance @ Wichita</u>					
2 WATER WELL OWNER: <u>Renallet Construction</u>					
RR#, St. Address, Box # : <u>3245 W. 47st St. S.</u>			Board of Agriculture, Division of Water Resources Application Number:		
City, State, ZIP Code : <u>Wichita, KS 67217</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL . . . 100' . . . ft. ELEVATION:			
A section box diagram consisting of two vertical columns separated by a dashed line, and two horizontal rows separated by solid lines. The top-left corner is labeled 'NW', top-right 'NE', bottom-left 'SW', and bottom-right 'SE'. A small black dot is drawn in the center of the 'SW' quadrant. To the left of the diagram are labels 'N' at the top and 'S' at the bottom. To the right are labels 'W' and 'E'.		Depth(s) Groundwater Encountered 1.ft. 2.ft. 3.ft. Well's Static Water Level . . . 30' . . . ft. below land surface measured on mo/day/yr <u>4-1-02</u> Pump test data: Well water wasft. after . . . hours pumping . . . gpm Est. Yieldgpm: Well water wasft. after . . . hours pumping . . . gpm Bore Hole Diameter. . . . 7' . . . in. to . . . 100' . . . 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 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes. . . No. <u>X</u> ; If yes, mo/day/yrs sample was submitted Water Well Disinfected? Yes <u>X</u> No			
		5 TYPE OF BLANK CASING USED:			
		Blank casing diameter . . . 5' . . . in. to 60' . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft. Casing height above land surface. . . 12' . . . in., weight . . . lbs./ft. Wall thickness or gauge No. <u>SPR 26</u>			
		TYPE OF SCREEN OR PERFORATION MATERIAL:			
		SCREEN OR PERFORATION OPENINGS ARE:			
GRAVEL PACK INTERVALS: From . . . 20' . . . ft. to . . . 100' . . . ft.		FROM . . . FT. TO . . . FT.		TO . . . FT. FROM . . . FT.	
From . . . ft. to . . . ft.		From . . . ft. to . . . ft.		From . . . ft. to . . . ft.	
From . . . ft. to . . . ft.		From . . . ft. to . . . ft.		From . . . ft. to . . . ft.	
From . . . ft. to . . . ft.		From . . . ft. to . . . ft.		From . . . ft. to . . . ft.	
6 GROUT MATERIAL:					
Grout Intervals: From . . . 4' . . . ft. to . . . 20' . . . ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.					
What is the nearest source of possible contamination:					
Direction from well?					
FROM		TO		LITHOLOGIC LOG	
FROM		TO		PLUGGING INTERVALS	
0		23		dry	
23		35		shale	
35		37		lime	
37		60		shale	
60		82		shale w/ lime streaks	
82		100		lime & 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) . . . 4-1-02 . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. . . 171 . . . This Water Well Record was completed on (mo/day/yr) . . . 4-2-02 . . . under the business name of <u>G+S Drilling, Inc.</u> by (signature)					
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 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					