

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		SW ¼ NE ¼ NE ¼		29		T 27 S		R 2 E	
Distance and direction from nearest town or city street address of well if located within city? 9401 E. Kellog, Wichita, Ks									
2 WATER WELL OWNER: David Jackson, Kansas Turnpike Authority									
RR#, St. Address, Box # : 3939 SW Topeka Blvd. Board of Agriculture, Division of Water Resources									
City, State, ZIP Code : Topeka, KS 66606 Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 30 ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.							
		WELL'S STATIC WATER LEVEL 23.80 ft. below land surface measured on mo/day/yr 12/1/2008							
		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 8.625 In. to 30 Ft. and _____ in. to _____ Ft.							
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well MW-12									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was Submitted _____									
Water Well Disinfected? Yes _____ No X									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____									
7 Fiberglass _____ Threaded X									
Blank casing diameter 2 In. to 15 Ft., Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.									
Casing height above land surface FLUSH in., weight SCH 40 Lbs./ft. Wall thickness or gauge No. _____									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 7 Torch cut 9 Drilled holes 10 Other (specify) _____									
SCREEN-PERFORATED INTERVALS: From 15 ft. to 30 ft. From _____ ft. to _____ ft.									
SAND PACK INTERVALS: From 14 ft. to 30 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____									
Grout Intervals From3 0 ft. to 12 Ft. From2 12 Ft. to 14 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)									
Contaminated Site									
Direction from well? _____ How many feet? _____									
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			
0	1	Fill	asphalt						
1	7	CL	Silty clay, brown, soft, moist						
7	13	CL	Silty clay, firm, moist, no odor						
13	18	CL	Silty clay, mottled grey, firm						
18	24	Shale	Weathered shale, firm, moist						
24	27	Shale	Shale, green-brown, hard						
27	30	Shale	Shale, very hard						
30	TD		End borehole						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w									
Completed on (mo/day/yr) 11/18/2008 And this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 12/1/2008									
under the business name of Associated Environmental, Inc. By (signature) Bradley J. Johnson									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three 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.									

OFFICE USE ONLY

T

R

SEC