

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>18</u>	T <u>27</u> S	R <u>2</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>6402 East Central, Wichita, KS</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : <u>Beard Oil Company</u> <u>14201 Doney Circle</u>		Application Number: <u>NA</u>			
City, State, ZIP Code : <u>Wichita, KS 67230</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>18'</u> ft. ELEVATION: <u>Not Surveyed Yet</u>			
		Depth(s) Groundwater Encountered 1. <u>NA</u> ft. 2. <u>NA</u> ft. 3. <u>NA</u> ft.			
		WELL'S STATIC WATER LEVEL <u>NA</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: <u>8</u> in. to <u>18</u> 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 <u>10</u> Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes _____ No <u>X</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ <u>2</u> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded <u>✓</u>					
Blank casing diameter <u>2"</u> in. to <u>3</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <u>Flush</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 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 <u>2</u> 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 <u>18'</u> ft. to <u>3</u> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>18'</u> ft. to <u>3</u> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other _____ Grout Intervals: From <u>7'</u> ft. to <u>1'</u> 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 <u>11</u> Fuel storage 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) _____					
Direction from well? <u>East</u> How many feet? <u>300</u>					
FROM		TO		LITHOLOGIC LOG	
0		5'		Brown sandy clay w/ black & brown mottling, iron stains, no odor, soft @ 5'	
5		10'		SAA w/ gray & black mottling, iron stains, firm, no odor	
10		17'		2" crushed limestone layer @ 8', Gray sandy clay w/ brown & black mottling, iron stains, no odor, limestone nodules, wet @ 12', very soft & moist @ 14', saturated @ 15', yellow-brown mottling @ 14-15'	
17		18'		Gray medium-gr sand, no odor saturated	
FROM		TO		PLUGGING INTERVALS	

RECEIVED

APR 01 1993

BUREAU OF WATER

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>1</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>Feb. 12 98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>634</u> This Water Well Record was completed on (mo/day/yr) <u>March 6-98</u> under the business name of <u>Shirley Environmental Testing LLC</u> by (signature) <u>M. J. Shirley</u>	
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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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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