

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number
County: Sedawick		SE ¼ SE ¼ SW ¼		20	T 27 S	R 2 EW
Distance and direction from nearest town or city street address of well if located within city? 8330 E. Kellogg; 46'E, 22'S of SE corner of Coastal Mart bldg						
2 WATER WELL OWNER: Coastal Mart, Inc.						
RR#, St. Address, Box # : 110 S. Main, Suite 500				Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Wichita, KS 67202				Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 16.0 ft. ELEVATION: 1331.83 TO C				
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr 2/16/98				
		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 . . . in. to . . . 16 . . . 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 <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		CASING JOINTS: Glued _____ Clamped _____
2 PVC		4 ABS		6 Asbestos-Cement		Welded _____
				7 Fiberglass		Threaded flush
Blank casing diameter . . . 2 . . . in. to . . . 6 . . . ft., Dia				_____ in. to . . . ft., Dia		_____ in. to . . . ft.
Casing height above land surface . . . 0.703 . . . in., weight				_____ lbs./ft. Wall thickness or gauge No. sch 40		
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)
						9 ABS
						10 Asbestos-cement
						11 Other (specify)
						12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot		2 Mill slot		5 Gauzed wrapped		8 Saw cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		11 None (open hole)
				7 Torch cut		9 Drilled holes
						10 Other (specify)
SCREEN-PERFORATED INTERVALS: From . . . 6 . . . ft. to . . . 16 . . . ft., From . . . ft. to . . . ft.						
From . . . ft. to . . . ft., From . . . ft. to . . . ft.						
GRAVEL PACK INTERVALS: From . . . 4 . . . ft. to . . . 16 . . . 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 . . . 1 . . . ft. to . . . 4 . . . 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below)
Direction from well? _____ How many feet? _____						
FROM		TO		LITHOLOGIC LOG		PLUGGING INTERVALS
0		0.5		Asphalt		
0.5		1.5		Topsoil/Fill		
1.5		16		Clay, h-m plasticity		
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) 3/16/98 and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. 531				This Water Well Record was completed on (mo/day/yr) 3/24/98		
under the business name of GSI				by (signature) Candace Watson		

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.