

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>SE 1/4 SE 1/4 SE 1/4</u>	<u>10</u>	T <u>27</u> S	R <u>2</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 1/2 Mi. East of Wichita</u>					
2 WATER WELL OWNER: <u>Rocky Blockyoo</u>					
RR#, St. Address, Box # : <u>12525 E Birchwood</u>					
City, State, ZIP Code : <u>Wichita, KS. 67206</u>					
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: <u>80</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>73</u> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>24</u> ft. below land surface measured on mo/day/yr <u>5/4/93</u>			
		Pump test data: Well water was <u>28</u> ft. after <u>4</u> hours pumping <u>35</u> gpm			
		Est. Yield <u>40</u> gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <u>10</u> in. to ft., and in. to ft.			
WELL WATER TO BE USED AS:					
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 <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes No <input checked="" type="checkbox"/>					
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 Blank casing diameter <u>5</u> in. to ft., Dia. in. to ft., Dia. in. to ft. Casing height above land surface <u>12</u> in., weight <u>160</u> 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) SCREEN OR PERFORATION OPENINGS ARE:      5 Gauzed wrapped      8 Saw cut      11 None (open hole) 1 Continuous slot      ③ Mill slot      6 Wire wrapped      9 Drilled holes 2 Louvered shutter      4 Key punched      7 Torch cut      10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From <u>60</u> ft. to <u>80</u> ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>80</u> ft., From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement      2 Cement grout      ③ Bentonite      4 Other					
Grout Intervals: From <u>20</u> ft. to 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	3	BACK FILL			
3	4	BURIED SURFACE SOIL			
4	16	BROWN CLAY			
16	70	YELLOW CLAY			
70	80	GREY SHALE			
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) <u>5-20-93</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>493</u> This Water Well Record was completed on (mo/day/yr)					
under the business name of <u>Reisen USA Drilling</u> by (signature) <u>Denny Reisen</u>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send two three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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