

LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number						
County: Sedgwick		NW ¼ NE ¼ SW ¼	11	T 27 S	R 2 E						
Distance and direction from nearest town or city street address of well if located within city? 2 1/2 Mi. EAST OF WICHITA											
WATER WELL OWNER: Lucia Valdes Sanchez											
Tr#, St. Address, Box #: 14801 Sharon Ln.											
City, State, ZIP Code: Wichita, KS 67230											
Board of Agriculture, Division of Water Resources Application Number:											
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		DEPTH OF COMPLETED WELL: 80 ft. ELEVATION:									
<div style="text-align: center;">N <table border="1" style="margin: auto; width: 100px; height: 100px;"><tr><td style="padding: 5px;">NW</td><td style="padding: 5px;">NE</td></tr><tr><td style="text-align: center; padding: 5px;">X</td><td style="padding: 5px;"></td></tr><tr><td style="padding: 5px;">SW</td><td style="padding: 5px;">SE</td></tr></table> S</div>		NW	NE	X		SW	SE	Depth(s) Groundwater Encountered 1. 72 ft. 2. . ft. 3. . ft.			
		NW	NE								
		X									
		SW	SE								
WELL'S STATIC WATER LEVEL 21 ft. below land surface measured on mo/day/yr 5/10/93											
Pump test data: Well water was 26 ft. after 4 hours pumping 30 gpm											
Est. Yield 40 gpm: Well water was . ft. after . hours pumping . gpm											
Bore Hole Diameter. . in. to . 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. ✓ If yes, mo/day/yr sample was submitted											
Water Well Disinfected? Yes No ✓											
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 . 5 in. to . ft., Dia . in. to . ft., Dia . in. to . ft.											
Casing height above land surface . 12 in., weight 160 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:											
1 Continuous slot ③ Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)											
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes											
SCREEN-PERFORATED INTERVALS: From . 60 ft. to . 80 ft., From . ft. to . ft.											
GRAVEL PACK INTERVALS: From . 20 ft. to . 80 ft., From . ft. to . ft.											
GROUT MATERIAL: 1 Neat cement 2 Cement grout ③ Bentonite 4 Other											
Grout Intervals: From . 2 ft. to . 20 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)											
Direction from well?											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0		1		Surface Soil							
1		2		Brown Clay							
2		8		Yellow Clay							
8		10		Soft Lime clay							
10		68		Yellow Clay							
68		75		Red clay							
75		80		Shaley lime							
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) 5/10/93 and this record is true to the best of my knowledge and belief. Kansas											
Water Well Contractor's License No. 493 This Water Well Record was completed on (mo/day/yr)											
Under the business name of Reiser Well Drilling by (signature) Jimmy Reiser											
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.											