

Mw# 7

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	SEDGWICK	NW ¹ / ₄ NW ¹ / ₄ SW ¹ / ₄	22	28-S	1-E

Distance and direction from nearest town or city street address of well if located within city?

3700 East Lincoln Wichita, KS

Mw# 7

2	WATER WELL OWNER: Sisters of St Joseph	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #:	3700 East Lincoln	Application Number:
City, State, ZIP Code :	Wichita KS 67217	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 15 ft												
		WELL'S STATIC WATER LEVEL ft. WELL WAS USED AS: <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>☒ 10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>		1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	☒ 10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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Was a chemical / bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted															
Water Well Disinfected: Yes No															

5	TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ☒ 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter 2 in. Was casing pulled? Yes ☒ No If yes, how much 5'	
Casing height above or below land surface 0.3 in.	

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	☒ 3 Bentonite	4 Other Topsoil																				
GROUT PLUG INTERVALS: From ft. to ft., From 15 ft. to 1 ft., From 1 ft. to 0 ft.																									
What is the nearest source of possible contamination:																									
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Direction from well? North How many feet? 200'																									

FROM	TO	PLUGGING MATERIALS
15	1	Bentonite
1	0	Topsoil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8-6-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 575 This Water Well Record was completed on (mo/day/year) 8-24-01 under the business name of FUNKER DRILLING SERVICE INC.
by (signature) [Signature]	

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: 785/296-3565. Send one to Water Well Owner and retain one for your records.