

SW NW NE NW

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: SEDGWICK	NE 1/4 NE 1/4 NW 1/4	8	T28S	R1E EAST																								
Distance and direction from nearest town or city street address of well if located within city? backyard - 3252 S. OAK, WICHITA KS 67217																													
2	WATER WELL OWNER: MS. AMY JOHNSON RR #, St. Address, Box #: 3252 S. OAK City, State, ZIP Code: WICHITA, KS 67217																												
Board of Agriculture, Division of Water Resources Application Number: Unknown																													
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:																												
DEPTH OF WELL 24 ft WELL'S STATIC WATER LEVEL 8 ft. WELL WAS USED AS: <table style="width:100%;"> <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><u>7 Domestic (Lawn & Garden)</u></td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> 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 <u>X</u> No						1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	<u>7 Domestic (Lawn & Garden)</u>	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other												
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5	TYPE OF BLANK CASING USED:																												
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6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other																												
Grout Plug Intervals: From 10 ft. to 2.5 ft., From ft. to ft., From to ft.																													
What is the nearest source of possible contamination:																													
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Direction from well? WEST How many feet? 15																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>2.5</td> <td>0</td> <td>Topsoil</td> </tr> <tr> <td>10</td> <td>2.5</td> <td>Bentonite</td> </tr> <tr> <td>24</td> <td>10</td> <td>Sand / bleach</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	2.5	0	Topsoil	10	2.5	Bentonite	24	10	Sand / bleach												
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/9/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 628 This Water Well Record was completed on (mo/day/year) 11/9/02 under the business name of JME Enterprises by (signature) <i>[Signature]</i>																												
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.																													