

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: SEDGWICK		SE 1/4 SW 1/4 SW 1/4		7		T 28 S		R 1 @E E/W	
Distance and direction from nearest town or city?				Street address of well if located within city?					
				1912 W. McArthur Lot 21A, Wichita, Ks.					
2 WATER WELL OWNER: Air Capital Mobile Park									
RR#, St. Address, Box #: 1912 W. McArthur Lot 21A									
City, State, ZIP Code: Wichita, KS.									
Board of Agriculture, Division of Water Resources									
Application Number:									
3 DEPTH OF COMPLETED WELL: 45 ft. Bore Hole Diameter: 11 in. to ft., and in. to ft.									
Well Water to be used as:									
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well									
2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
7 Lawn and garden only 10 Observation well									
Well's static water level: 15 ft. below land surface measured on 2 month 24 day 81 year									
Pump Test Data: Well water was ft. after hours pumping gpm									
Est. Yield gpm: Well water was ft. after hours pumping gpm									
4 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued X Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Cer-Mac Welded									
7 Fiberglass SDR-26 Styrene Threaded									
Blank casing dia: 5 in. to 30 ft., Dia in. to ft., Dia in. to ft.									
Casing height above land surface: 12 in., weight lbs./ft. Wall thickness or gauge No. 203									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement Same									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) SDR-26									
12 None used (open hole)									
Screen or Perforation Openings Are:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut .06 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes									
7 Torch cut 10 Other (specify)									
Screen-Perforation Dia: 5 in. to 45 ft., Dia in. to ft., Dia in. to ft.									
Screen-Perforated Intervals: From 30 ft. to 45 ft., From ft. to ft.									
Gravel Pack Intervals: From 14 ft. to 45 ft., From ft. to ft.									
5 GROUT MATERIAL:									
1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grouted Intervals: From 40" ft. to 14 ft., From ft. to ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well									
2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well									
3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)									
13 Watertight sewer lines									
Direction from well: West How many feet: 40 ? Water Well Disinfected? Yes X No									
Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, date sample									
was submitted month day year Pump Installed? Yes No X									
If Yes: Pump Manufacturer's name Model No. HP Volts									
Depth of Pump Intake ft. Pumps Capacity rated at gal./min.									
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other									
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was									
completed on 2 month 24 day 81 year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236									
This Water Well Record was completed on 3 month 23 day 81 year under the business									
name of Harp Well & Pump Serv., Inc. by (signature) M. Arnold									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:									
FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG									
0 3 Topsoil									
3 7 Clay									
7 30 Fine Sand with Clay									
30 45 Medium Sand									
ELEVATION:									
Depth(s) Groundwater Encountered 1. 1.5 ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed)									
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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and									
retain one for your records.									

OFFICE USE ONLY

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R

1

DW

SEC.

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SE 1/4 SW 1/4 SW 1/4