

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		<u>NW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>5</u>	T <u>28</u> S	R <u>1</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>602 West 26th South</u>					
2 WATER WELL OWNER: <u>Mr. Dick McClintock</u>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>602 West 26th South</u>		Application Number: <u>N/A</u>			
City, State, ZIP Code: <u>Wichita, Kansas 67217</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>36</u> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. <u>16</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>16</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was <u>20</u> ft. after <u>1</u> hours pumping <u>20</u> gpm			
		Est. Yield <u>60</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>11</u> in. to <u>10</u> 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 <u>7 Lawn and garden only</u> 10 Observation well			
		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 _____ No <u>X</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>6</u> in. to <u>31</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				8 Concrete tile	
Casing height above land surface <u>12</u> in., weight <u>1.95</u> lbs./ft. Wall thickness or gauge No. <u>SDR26</u>				9 Other (specify below)	
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>31</u> ft. to <u>36</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>0</u> ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other _____					
Grout Intervals: From <u>0</u> ft. to <u>10</u> 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? <u>South</u> How many feet? <u>10</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Drk Brn. Sand / Clay loam			
2	3	Lt. Brn. Sand / Clay loam			
3	4	Drk. Brn. Fine sand			
4	8	Lt. Brn. Fine sand			
8	10	Lt. Brn. Sand / Clay loam			
10	27	Med. coarse sand			
27	28	Clay balls			
28	33	Med. coarse gravel			
33	36	Fine gray sand			
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>8/13/85</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>285</u> This Water Well Record was completed on (mo/day/year) <u>8/13/85</u> under the business name of <u>Prothroe Pump & Well Service</u> by (signature) <u>Alvin J. Prothroe</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 top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

H

EW

SEC.

1/4

1/4

1/4