

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range, Number
County: <u>Sedgwick</u>		<u>NW 1/4 SE 1/4 SE 1/4</u>	<u>11</u>	<u>T 28 S</u>	<u>R 1 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>MacArthur & Oliver Wichita, KS</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : <u>3801 S. Oliver</u>		Application Number: <u>34</u>			
City, State, ZIP Code : <u>Wichita, KS 67216</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>34</u> ft. ELEVATION: <u>1319.60</u>			
		Depth(s) Groundwater Encountered 1. <u>12.6</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>12.6</u> ft. below land surface measured on mo/day/yr <u>4/1/86</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>8</u> 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 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 Concrete tile	
Blank casing diameter <u>4</u> in. to <u>14</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		7 Fiberglass		9 Other (specify below) _____	
Casing height above land surface <u>7</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____		8 Asbestos-Cement		CASING JOINTS: Glued _____ Clamped <u>X</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement		Welded _____	
1 Steel		3 Stainless steel		Threaded _____	
2 Brass		4 Galvanized steel		7 RMP (SR)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Fiberglass		8 RMP (SR)	
1 Continuous slot		6 Concrete tile		9 ABS	
2 Louvered shutter		7 Torch cut		10 Asbestos-cement	
3 Mill slot		8 Wire wrapped		11 Other (specify) _____	
4 Key punched		9 Drilled holes		12 None used (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>14</u> ft. to <u>34</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		5 Gauzed wrapped		10 Other (specify) _____	
GRAVEL PACK INTERVALS: From <u>12</u> ft. to <u>34</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		6 Saw cut		11 None (open hole)	
		7 Torched			
		8 Drilled holes			
		9 Other (specify)			
6 GROUT MATERIAL:					
Grout Intervals: From <u>0</u> ft. to <u>12</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		1 Neat cement		2 Cement grout	
What is the nearest source of possible contamination:		3 Bentonite		4 Other _____	
1 Septic tank		7 Pit privy		10 Livestock pens	
2 Sewer lines		8 Sewage lagoon		11 Fuel storage	
3 Watertight sewer lines		9 Feedyard		12 Fertilizer storage	
4 Lateral lines				13 Insecticide storage	
5 Cess pool				14 Abandoned water well	
6 Seepage pit				15 Oil well/Gas well	
				16 Other (specify below) _____	
Direction from well? _____		How many feet? _____			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1	Brown silty clay			
1	3	Dark Brown silty clay			
3	7	Light Brown silty clay			
7	11	Gray silty clay			
11	15	Gray Brown sand silty clay			
15	26	Brown/gray silty clay			
26	30	Brown/gray silty clay w/ gravel			
30	34	Brown/gray clay w/ gravel			
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>3-21-86</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>415</u> This Water Well Record was completed on (mo/day/yr) <u>4-1-86</u> under the business name of <u>Daniel's Drilling Co.</u> by (signature) <u>David W. Daniels</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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					

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