

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Salamish</u>		<u>NW 1/4 NW 1/4 SE 1/4</u>	<u>16</u>	T <u>28</u> S	R <u>1</u> (EW)

2 WATER WELL OWNER: Morris McCormick
RR#, St. Address, Box #: 4437 Washington Ave.
City, State, ZIP Code: Wichita Kansas

Depth(s) Groundwater Encountered 1 ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL 199 ft. below land surface measured on mo/day/yr

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. 8 in. to ft., and in. to ft.

WELL WATER TO BE USED AS:

1 Domestic	3 Feedlot	6 Oil field water supply	9 Dewatering	11 Injection well
2 Irrigation	4 Industrial	7 <u>Lawn and garden only</u>	10 Monitoring well	12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No

[illegible]

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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.