

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number					
County: <u>SEDGWICK</u>		SW $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$		28		T 28 S		R 1E E XX					
Distance and direction from nearest town or city? <u>$\frac{1}{4}$ S. of 55th S. and $\frac{1}{4}$ W. of Hydraulic</u>				Street address of well if located within city? <u>Wichita, Kansas</u>									
2 WATER WELL OWNER: <u>Meyer Nursery</u> RR#, St. Address, Box #: <u>5439 S. Hydraulic</u> City, State, ZIP Code: <u>Wichita, Kansas</u>													
Board of Agriculture, Division of Water Resources Application Number: _____													
3 DEPTH OF COMPLETED WELL: <u>40</u> ft. Bore Hole Diameter: <u>11</u> 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: <u>15</u> ft. below land surface measured on <u>7</u> month <u>16</u> day <u>1979</u> 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 ☒ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing dia: <u>6</u> in. to <u>28</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface: <u>12</u> in., weight <u>3.96</u> lbs./ft. Wall thickness or gauge No. <u>316</u> TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole) Screen or Perforation Openings Are: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 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: <u>6</u> in. to <u>40</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Screen-Perforated Intervals: From <u>28</u> ft. to <u>40</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. Gravel Pack Intervals: From <u>10</u> ft. to <u>40</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.													
5 GROUT MATERIAL: 1 Neat cement <u>2 Cement grout</u> 3 Bentonite 4 Other _____ Grouted 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 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 No apparent source e... Direction from well _____ How many feet _____? Water Well Disinfected? Yes ☒ No _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No ☒ 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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>7</u> month <u>16</u> day <u>1979</u> year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>236</u> This Water Well Record was completed on <u>10</u> month <u>30</u> day <u>1979</u> year under the business name of <u>Harp Well & Pump Service, Inc.</u> by (signature) <u>M. Arnold</u>													
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:													
		FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
		0		3		Topsoil							
		3		12		Clay							
		12		25		Medium Sand							
		25		38		Coarse Sand							
		38		40		Gray Shale							
ELEVATION: _____													
Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)													

OFFICE USE ONLY

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ED

SEC

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SW 1/4

NE 1/4

NE 1/4

NE 1/4