

LOCATION OF WATER WELL: County: <u>Sedgewick</u>		Fraction <u>NW 1/4 SW 1/4 NW 1/4</u>	Section Number <u>34</u>	Township Number T <u>28</u> S	Range Number R <u>1</u> EW																
Distance and direction from nearest town or city street address of well if located within city? <u>1735 PAINE BAY - NAYSVILLE</u>																					
WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		Board of Agriculture, Division of Water Resources Application Number:																			
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		DEPTH OF COMPLETED WELL..... ft. ELEVATION:																			
N E S W Mile W E <table border="1" style="margin-left: auto; margin-right: auto;"><tr><td>X</td><td>NW</td><td>--</td><td>NE</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td>--</td><td>SW</td><td>--</td><td>SE</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table>		X	NW	--	NE					--	SW	--	SE					Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr <u>10-28-87</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 in. to ft., and in. to ft.			
		X	NW	--	NE																
		--	SW	--	SE																
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..... If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes..... No																					
TYPE OF BLANK CASING USED:		CASING JOINTS: Glued..... Clamped.....																			
1 Steel 3 RMP (SR)		Welded.....																			
2 PVC 4 ABS		Threaded.....																			
Blank casing diameter in. to ft., Dia.		Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No. <u>SPR-26</u>																			
TYPE OF SCREEN OR PERFORATION MATERIAL:																					
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC		10 Asbestos-cement																			
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR)		11 Other (specify)																			
SCREEN OR PERFORATION OPENINGS ARE:		12 None used (open hole)																			
1 Continuous slot 3 Mill slot		8 Saw cut 11 None (open hole)																			
2 Louvered shutter 4 Key punched		9 Drilled holes																			
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.		10 Other (specify)																			
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.																					
GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other																					
Grout intervals: From ft. to ft., From ft. to ft.																					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well																			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well		12 Fertilizer storage 16 Other (specify below)																			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 13 Insecticide storage																					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard																					
Direction from well? <u>South</u>		How many feet? <u>120</u>																			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG																
0	2	top so.																			
2	8	clay																			
8	30	fine to med sand.																			
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>OCT 28, 1987</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>318</u> This Water Well Record was completed on (mo/day/yr) <u>OCT 28, 1987</u> under the business name of <u>DENINGER DRILLING</u> by signature <u>[Signature]</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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.																					