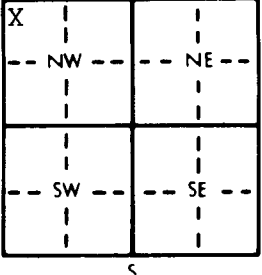


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		NW 1/4 NW 1/4 NW 1/4	16	T 28 S	R 1 EW
Distance and direction from nearest town or city street address of well if located within city? <u>4003 South Broadway, Wichita, Kansas</u>					
2 WATER WELL OWNER:		Town & Country Markets		01948033	MW-8
RR#, St. Address, Box # :		P.O. Box 17087		Board of Agriculture, Division of Water Resources	
City, State, ZIP Code :		Wichita, Kansas 67217		Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>15.0</u> ft. ELEVATION: <u>Approx. 1281.0</u>			
N W E S 		Depth(s) Groundwater Encountered <u>1</u> <u>10.0</u> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>N/A</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>N/A</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>8.25</u> in. to <u>15.0</u> ft. and _____ in. to _____ ft.			
5 TYPE OF BLANK CASING USED:		WELL WATER TO BE USED AS:			
1 Steel		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____	
2 PVC		6 Asbestos-Cement	9 Other (specify below)	Welded _____	
3 RMP (SR)		7 Fiberglass		Threaded _____ <u>X</u>	
4 ABS					
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. <u>Schedule 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC			
1 Steel		5 Fiberglass	8 RMP (SR)	10 Asbestos-cement	
2 Brass		6 Concrete tile	9 ABS	11 Other (specify) _____	
3 Stainless steel				12 None used (open hole)	
4 Galvanized steel					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped			
1 Continuous slot		3 Mill slot	6 Wire wrapped	8 Saw cut	
2 Louvered shutter		4 Key punched	7 Torch cut	9 Drilled holes	
				10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS:		11 None (open hole)			
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS:					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:		4 Other _____			
1 Neat cement		2 Cement grout	3 Bentonite		
Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Livestock pens			
1 Septic tank		4 Lateral lines	7 Pit privy	14 Abandoned water well	
2 Sewer lines		5 Cess pool	8 Sewage lagoon	15 Oil well/Gas well	
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	16 Other (specify below) <u>UST</u>	
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0.0	1.0	Topsoil			
1.0	4.0	Brown Sandy Silt			
4.0	5.0	Dark Brown Sandy Clay			
5.0	6.5	Tan Fine Sand			
6.5	8.5	Tan, Fine to Medium Sand, Trace Coarse Sand			
8.5	15.0	Tan, Medium to Coarse Sand			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>10/07/94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>416</u> This Water Well Record was completed on (mo/day/yr) <u>11-3-94</u> under the business name of <u>Terracon Consultants, Inc.</u> by (signature) <u>Steve Fischer</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					