

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		<u>NW 1/4 NW NE NW 1/4</u>	<u>6</u>	T <u>28</u> S	R <u>10</u> E/W

2045 W. Pawnee

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX. 4 DEPTH OF COMPLETED WELL. 30 ft. ELEVATION:

WELL'S STATIC WATER LEVEL 15 ft. below land surface measured on mo/day/yr 8-15-94

5	TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped
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Blank casing diameter, 1 1/4 in. to 2 ft., Dia. 2 in. to 2 ft., Dia. 2 in. to 2 ft.

Casing height ~~above~~ ^{below} land surface... 34 in., weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)

1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) <i>N/A</i>

SCREEN-PERFORATED INTERVALS: From N/A ft. to N/A ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From N/A ft. to N/A ft., From _____ ft. to _____ ft.

From 00 ft. to 00 ft., From 00 ft. to 00 ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
Grout Intervals: From 3 ft. to 30 ft., 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	10 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fertilizer storage	16 Other (specify below)

2 Sewer lines	5 Sess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Sewage pit	9 Foodyard	13 Insecticide storage	

Direction from well? E How many feet? 20

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
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			0	3	TOP SOIL
			3	30	1/2" CEMENT

				5	05	ROBIN, CEMAL
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					Pf. 3-17
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Corrupted
Removed 10 ft. of

PIPE Filled with
NEAT CEMENT FROM

● 3-30 covered with TOP SOIL

[illegible][illegible]

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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) 8-15-94 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 313 This Water Well Record was completed on (mo/day/yr) 08/11/2011
under the business name of JET DRILLING by (signature) [Signature]

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.