

1) LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>NE ¼ NE ¼ NE ¼</u>	<u>10</u>	<u>T 29 S</u>	<u>R 1 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Hillside + 79th St S, SE of intersection</u>					
2) WATER WELL OWNER: <u>Kansas Corporation Commission</u>					
RR#, St. Address, Box # : <u>230 E. William</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Wichita, KS 67202</u>			Application Number:		
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4) DEPTH OF COMPLETED WELL: <u>27.5</u> ft. ELEVATION: <u>1240.03 TOE</u> , <u>1250.53 TOE</u>			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>10.99</u> ft. below land surface measured on mo/day/yr <u>11/27/99</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: <u>8</u> in. to <u>27.5</u> ft., and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only <u>10 Monitoring well</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes _____ No <u>X</u>			
5) TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
<u>2 PVC</u>		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter _____ in. to _____ ft.		Dia _____ in. to _____ ft.		8 Concrete tile	
Casing height above land surface _____ in.		weight _____ lbs./ft.		9 Other (specify below)	
TYPE OF SCREEN OR PERFORATION MATERIAL:		CASING JOINTS: Glued _____ Clamped _____			
1 Steel		Welded _____			
2 Brass		<u>Threaded flush</u>			
3 Stainless steel					
4 Galvanized steel					
5 Fiberglass					
6 Concrete tile					
7 Torch cut					
8 Saw cut					
9 Drilled holes					
10 Other (specify)					
11 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot					
<u>3 Mill slot</u>					
2 Louvered shutter					
4 Key punched					
SCREEN-PERFORATED INTERVALS:					
From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS:					
From _____ ft. to _____ ft.					
6) GROUT MATERIAL:					
1 Neat cement		<u>Cement grout</u>		<u>3 Bentonite</u>	
Grout Intervals: From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		4 Other _____	
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Clay, h-m plasticity			
3	6	Silty clay			
6	27.5	Sand, f-m grained			
7) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>1/27/99</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>2/8/99</u> under the business name of <u>Geotechnical Services, Inc. (GSI)</u> by (signature) <u>Candace Watson</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.					