

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		NE 1/4 NE 1/4 SW 1/4		1		T 29 S		R 1 EW	
Distance and direction from nearest town or city street address of well if located within city?						Store #750			
55' W and 175' S of 1001 North Buckner, Derby, Kansas						52905002 MW-8			
2 WATER WELL OWNER: Kwik Shop, Inc.									
RR#, St. Address, Box # : 734 East 4th Street						Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Hutchinson, Kansas 67501						Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 70 ft. ELEVATION: Approx. Surface Elev.: 1321							
		Depth(s) Groundwater Encountered 1. 63 ft. 2. _____ ft. 3. _____ ft.							
		WELL'S STATIC WATER LEVEL 61.5 ft. below land surface measured on mo/day/yr 11/05/90							
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Est. Yield N/A gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter 7 in. to 7.0 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 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____									
Water Well Disinfected? Yes _____ No X									
5 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 _____ X									
Blank casing diameter 2 in. to 49.5 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.									
Casing height above land surface -4 in., weight _____ lbs./ft. Wall thickness or gauge No. Schedule 40									
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-PERFORATED INTERVALS: From 49.5 ft. to 69.5 ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 48.5 ft. to 70.0 ft., From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____									
Grout Intervals: From 0 ft. to 46.5 ft., From 46.5 ft. to 48.5 ft., From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____ 13 Insecticide storage									
Direction from well? North/Northeast						How many feet? 260			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	0.5	Topsoil, Brown							
0.5	10.5	Fat Clay, Dark Brown to Red-Brown							
10.5	50.0	Lean to Fat Clay, Red-Brown to Pale Red-Brown							
50.0	60.0	Lean Clay with Sand to Sandy Lean Clay, Pale Red-Brown							
60.0	70.0	Silty Fine Sand to Fine to Medium Sand, Brown							
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) 11/01/90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 416 This Water Well Record was completed on (mo/day/yr) 12/15/90 under the business name of Terracon Consultants, Inc. by (signature) <i>[Signature]</i>									
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									