

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>		Fraction <u>NW 1/4 NE 1/4 NE 1/4</u>	Section Number <u>8</u>	Township Number <u>T 29 S</u>	Range Number <u>R 1 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>103 W 80th St South</u>					
2 WATER WELL OWNER: RR#, St. Address, Box # : <u>Maggie Wright (Young)</u> <u>103 W 80th St South</u> City, State, ZIP Code : <u>Wichita KS 67233</u>			Board of Agriculture, Division of Water Resources Application Number: _____		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>23.6</u> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. <u>12</u> ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>12</u> ft. below land surface measured on mo/day/yr <u>9/28/94</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. 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 <u>Lawn and garden only</u> 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No _____			
		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 _____ Blank casing diameter <u>1 1/4</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>3 ft Below</u> weight _____ lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement <u>NA</u> 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 <u>NA</u> 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From <u>NA</u> ft. to <u>NA</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
		6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other			
Grout Intervals: From <u>23.6</u> ft. to <u>3</u> ft. From _____ ft. to _____ 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? <u>West</u> How many feet? <u>35 ft</u>					
FROM		TO		LITHOLOGIC LOG	
FROM		TO		PLUGGING INTERVALS	
				<u>23.6</u> <u>3</u> <u>Cement Grout,</u> <u>Compacted Soil</u>	
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) <u>5/28/94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) <u>9/29/94</u> under the business name of _____ by (signature) <u>[Signature]</u>					