

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: <u>Sedgwick</u>		<u>SE 1/4 NE 1/4 NE 1/4</u>		<u>9</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>8111 S. Hydraulic</u>											
2 WATER WELL OWNER: <u>Bob G. & Betty J. Shepherd</u>											
RR#, St. Address, Box #: <u>8111 S. Hydraulic</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>30</u> ft. ELEVATION:									
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.									
		WELL'S STATIC WATER LEVEL <u>13' 6"</u> ft. below land surface measured on mo/day/yr <u>11/5/94</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:									
		1 Domestic <u>Was</u> 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial <u>7 Lawn and garden only</u> 9 Dewatering 12 Other (Specify below)									
		Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No _____; 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 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____											
Blank casing diameter <u>6</u> in. to _____ ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.											
Casing height above land surface <u>3 ft. below</u> in., 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 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) <u>NA</u> 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) <u>NA</u>											
SCREEN-PERFORATED INTERVALS: From <u>NA</u> ft. to <u>NA</u> ft., From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____											
Grout Intervals: From <u>30</u> ft. to <u>3</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:											
1 <u>Septic tank</u> 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)											
Direction from well? <u>North</u> How many feet? <u>30</u>											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
						<u>30</u>		<u>3</u>		<u>Bentonite Grout</u>	
						<u>3</u>		<u>0</u>		<u>Backfill - dirt</u>	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) _____ 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>11-6-94</u>											
under the business name of _____ by (signature) <u>B. Shepherd</u>											