

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	SW 1/4 SW 1/4 SW 1/4	36	29S	2E

Distance and direction from nearest town or city street address of well if located within city? **From the SW corner of Sec. 36, 486' E., 79' N.**

2 WATER WELL OWNER: Ray Dings 3333 S. Rutan RR#, St. Address, Box #: City, State, ZIP Code : Wichita, Ks. 67216	Board of Agriculture, Division of Water Resources Application Number:
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; height: 100px; border-collapse: collapse;"><tr><td style="width:25%; text-align: center;">N W</td><td style="width:25%; text-align: center;">N E</td></tr><tr><td style="width:25%; text-align: center;">S W</td><td style="width:25%; text-align: center;">S E</td></tr></table> S	N W	N E	S W	S E	4 DEPTH OF WELL.... 150ft. WELL'S STATIC WATER LEVEL... 48ft. WELL WAS USED AS: <table style="width:100%;"><tr><td style="width:33%;"><u>1 Domestic</u></td><td style="width:33%;">5 Public Water Supply</td><td style="width:33%;">9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden Only</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other.....</td></tr></table> Was a chemical/bacteriological sample submitted to Department? Yes....No... X . If yes, mo/day/yr sample was submitted..... Water Well Disinfected: Yes... X ... No.....	<u>1 Domestic</u>	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden Only	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other.....
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5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
<u>2 PVC</u>	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter...**5**.....in. Was casing pulled? Yes...**X**... No..... If yes, how much...**150**.....
Casing height above or below land surface.....in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other **State mix**.....

Grout Plug Intervals: From **2.5**..ft. to **5**.....ft., From **5**.....ft. to **13**...ft., From **13**.. to **150**..ft.

What is the nearest source of possible contamination: **Bentonite Clay State mix**

1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage	
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	
4 Lateral lines	<u>9 Feedyard</u>	14 Abandoned water well	
5 Cess Pool	<u>10 Livestock pens</u>	15 Oil well/Gas well	

Direction from well?**NW**..... How many feet? ...**75**.....

FROM	TO	PLUGGING MATERIALS
150.0	13.0	State mix
13.0	5.0	Clay
5.0	2.5	Bentonite
2.5	0.0	Top Soil

Variance 4/5/95 by Don Taylor
State Mix
1088 Lb. Cem
685 Lb Fly ash
188 Lb. Fine Sand
75 Gal Water

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)...**4-7-95**... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **279**..... This Water Well Record was completed on (mo/day/year) ...**4-17-95**... under the business name of **FUDGE DRILLING**.....
by (signature) *Michael R. Sandgren*

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.