

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																		
County: SEDGWICK		NE ¼ SE ¼ NE ¼		6		T 29S S		R 2E E/W																																																		
Distance and direction from nearest town or city street address of well if located within city? 1384 LONGHORN CT.; DERBY																																																										
2 WATER WELL OWNER: DAVID BURKETT																																																										
RR#, St. Address, Box # : 1384 LONGHORN CT.																																																										
City, State, ZIP Code : DERBY, KS																																																										
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 90 ft. ELEVATION: 22 ft. 2 ft. 3 ft.																																																								
		WELL'S STATIC WATER LEVEL 22 ft. below land surface measured on mo/day/yr 10/24/04																																																								
		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 10 in. to 90 ft. and _____ in. to _____ ft.																																																								
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well																																																										
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)																																																										
2 Irrigation 4 Industrial <u>7 Lawn and garden (domestic)</u> 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 X No _____																																																										
5 TYPE OF BLANK CASING USED:																																																										
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____																																																										
<u>6 PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____																																																										
7 Fiberglass _____ Threaded _____																																																										
Blank casing diameter 5 in. to 90 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																																																										
Casing height above land surface 16 in., weight 160 lbs./ft. Wall thickness or gauge No. 26																																																										
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																										
1 Steel 3 Stainless steel 5 Fiberglass 7 <u>PVC</u> 10 Asbestos-cement																																																										
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____																																																										
9 ABS 12 None used (open hole)																																																										
SCREEN OR PERFORATION OPENINGS ARE:																																																										
1 Continuous slot 3 <u>Mill slot</u> 5 Gauzed wrapped 8 Saw cut 11 None (open hole)																																																										
2 Louvered shutter 4 <u>Key punched</u> 6 Wire wrapped 9 Drilled holes																																																										
7 Torch cut 10 Other (specify) _____																																																										
SCREEN-PERFORATED INTERVALS: From 50 ft. to 90 ft. From _____ ft. to _____ ft.																																																										
From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																										
GRAVEL PACK INTERVALS: From 24 ft. to 90 ft. From _____ ft. to _____ ft.																																																										
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 4 ft. to 24 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																																																										
<u>3 Watertight sewer lines</u> 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____																																																										
13 Insecticide storage																																																										
Direction from well? SOUTH How many feet? 60																																																										
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td></td> <td>TOPSOIL</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>47</td> <td></td> <td>CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>47</td> <td>54</td> <td></td> <td>MED/FINE SAND</td> <td></td> <td></td> <td></td> </tr> <tr> <td>54</td> <td>76</td> <td></td> <td>BLUE SHALE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>76</td> <td>81</td> <td></td> <td>RED SHALE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>81</td> <td>90</td> <td></td> <td>BLUE SHALE</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	2		TOPSOIL				2	47		CLAY				47	54		MED/FINE SAND				54	76		BLUE SHALE				76	81		RED SHALE				81	90		BLUE SHALE			
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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/yr) 10/24/04 and this record is true to the best of my knowledge and belief. Kansas																																																										
Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/yr) 10/30/04																																																										
under the business name of CHASE DRILLING by (signature) <i>R. Chast</i>																																																										
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																										

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