

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		NW 1/4 NE 1/4 NW 1/4	20	29	2 E/W
Distance and direction from nearest town or city street address of well if located within city? 1 1/2 miles North + 1/4 mile E Mulvane					
2 WATER WELL OWNER:			Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box # : Pat Doyle 8311 E. 95th			Application Number:		
City, State, ZIP Code : Mulvane KS 67110					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL:			
		Depth(s) Groundwater Encountered 1 30 ft. 2. 30 ft. 3. 9-10-91 ft.			
		WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr 9-10-91			
		Pump test data: Well water was 30 ft. after 1/2 hours pumping 15 gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
Bore Hole Diameter 11 in. to 80 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 X No			
5 TYPE OF BLANK CASING USED:					
1 Steel 2 PVC		3 RMP (SR) 4 ABS		5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	
Blank casing diameter 5 in. to 25 ft. Dia		Casing height above land surface 12 in. weight 2600 lbs./ft. Wall thickness or gauge No. 160 PRC		CASING JOINTS: Glued X Clamped Welded Threaded	
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 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 25 ft. to 80 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 23 ft. to 80 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 3		2 Cement grout 23		3 Bentonite 4 Other	
Grout Intervals: 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? SE		How many feet? 160			
FROM TO LITHOLOGIC LOG			FROM TO PLUGGING INTERVALS		
0 5 top soil					
5 30 clay					
30 50 Fine sand					
50 65 clay					
65 80 Med. Sand					
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) 9-10-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 318 This Water Well Record was completed on (mo/day/yr) 9-11-91 under the business name of Weninger Drilling 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.					