

LOCATION OF WATER WELL: HARVEY	Fraction NE 1/4 SE 1/4 SW 1/4	Section Number 8	Township Number 23 SOUTH	Range Number 02 WEST
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Distance and direction from nearest town or city street address of well if located within city?
APPROXIMATELY 2 ½ MILES WEST AND 4 ¼ MILES NORTH OF HALSTEAD, KS

WATER WELL OWNER:
 RR#, St. Address, Box #: **CITY OF WICHITA 455 N. MAIN**
 City, State, ZIP Code: **WICHITA, KS 67202**
 Board of Agriculture, Division of Water Resources
 Application Number: **NA**

MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX <div style="text-align: center;"> N <table border="1" style="width:100px; height:100px; margin: auto;"> <tr><td></td><td></td></tr> <tr><td></td><td style="text-align: center;">X</td></tr> <tr><td></td><td></td></tr> </table> S </div>				X			DEPTH OF WELL 37 ft. WELL'S STATIC WATER LEVEL 18.21 ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well OW-5S-05</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 <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted : / / WaterWell Disinfected: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well OW-5S-05	3 Feedlot	7 Lawn and Garden Only	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other ____
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter **2.0 in.** Was casing pulled? Yes ☐ No ☒ if yes, how much **0.0 ft** bls
 Casing height above or below land surface **4.0 feet.**

GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other

Grout Plug Intervals: From **37 ft.** to **4 ft.**

What is the nearest source of possible contamination:

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

Direction from well? **southeast** How many feet? **approximately 500 ft.**

FROM	TO	PLUGGING MATERIALS
37	4	Bentonite, HolePlug
4	0	Topsoil

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **03 / 10 / 2006** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **NA** under the business name of **City of Wichita**
 by (signature) *Jim Schauf*

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, and 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.