				TER WELL REC	ORD Form			a-1212 ID I				
	ON OF WATER I		Fraction			i	on Numb	er Town	nship Number	1	Number	
	Ren		SW 1/2			1/4	16	T	23 s	R	05	W
	d direction from a 300 E Avenu		n or city street	address of well i	f located with	in city?						
2 WATER	WELL OWNER:			peline Com								
RR#, St. Ad	dress, Box # :		7340 W 21	l st St. N. St	e 200			Board	of Agriculture, D	vision of Wate	r Resour	rces
City, State,	ZIP Code :		Wichita, K	Cansas				Applic	ation Number:			
3 LOCATE	WELL'S LOCAT	ON WITH	4									
AN "X" II	N SECTION BOX	(:	DEPTH OF	COMPLETED	WELL	14	ft. EL	.EVATION: ,	ft	·		
			Dopin(0) 0100	nanator Endoar				. '''		·		- " +
1 I			WELL'S STAT	IC WATER LEV	EL	ft. b	elow land	d surface me	asured on mo/da	y/yr		g
	NWN	E	Pur	mp test data: \	Well water wa	s		ft. after	hours	pumping	g	pm 😅
9			Est. Yield	gpm: \	Well water wa	s			hours			ıpm I∺i
# w _		E								in. to		
					AS: 5 Publi	c water su	pply	8 Air	conditioning	11 Injection w	ell	
	sw - s	E		tic 3 Feed lot	6 Oil fie	eld water s	upply	9 Dev	vatering	12 Other (Spe	cify belo	ow)
V	X								onitoring well			
	s		Was a chemica	al/bacteriologica	l sample subr	nitted to D			No X If ye			as
			submitted						sinfected? Yes		<u> X</u>	
5 TYPE OF	BLANK CASIN			5 Wrough					NG JOINTS: GIU	edCla	amped	
1 Ste		3 RMP (SR)	6 Asbesto	s-Cement	9 Other (s	specify be	elow)	We			
2 PV	C	4 ABS		7 Fibergla	ss				Thre	aded	lush	
Blank casing	diameter	2	in. to	4 ft., Dia		in. to		ft., Dia		in. to		ft.
Casing heig	ht above land su	rface	12	in., weight	0.7	03	lbs./	ft. Wall thick	ness or gauge No	Sc.	h 40	
	CREEN OR PER								0 Asbestos-cen			
1 Ste	el	3 Stainle	ss steel	5 Fibergla	SS	8 F	RMP (SR) 1	1 Other (specify	1)		
2 Bra			ized steel	6 Concrete	e tile	9 A	ABS	1	2 None used (o	pen hole)		
SCREEN O	R PERFORATIO				5 Gauzed v	vrapped		8 Saw	cut	11 None (o	pen hole))
1 Cor	ntinuous slot	3	Mill slot		Wire wrap	pped		9 Drille				
2 Lou	vered shutter	4	• •		7 Torch cut			10 Othe	r (specify)			
SCREEN-PI	ERFORATED IN	TERVALS:	From		. to	14	ft.	. From	ft	to		_ft.
			From	ft	. to		ft.	. From	ft	to		- ft. م
GRA	AVEL PACK INT	ERVALS:	From		. to	14	ft.	. From	ft.	to		_ft.
			From	ft	. to		ft.	. From	ft	. to		ft.
6 GROUT	MATERIAL:	1 Neat c	ement					4 Other				
	als From							ft.	From	ft. to		ft.
	nearest source o				•••••			estock pens		bandoned wat		-
1 Sep	otic tank	•	4 Lateral line	s 7	Pit privy			el storage		il well/ Gas we	eil	
2 Sev	ver lines		5 Cess pool	8	Sewage lag	oon	12 Fe	rtilizer storage	e 16 C	ther (specify b	elow)	
3 Wa	tertight sewer line	es	6 Seepage p	it 9	Feedyard		13 Ins	ecticide stora	ige			
Direction fro							How ma	ny feet?				
FROM		ODE		DLOGIC LOG		FROM	ТО		PLUGGING	INTERVALS		
<u> </u>	6		/Clayey Si	It								<u> </u>
0	14	Sar	10							DE0-		\rac{\kappa_{\text{st}}}{\kappa_{\text{st}}}
				······						RECEI	VEC)
										NOV 2 9	2004	
									BU	REAU OF	WAT	ER
7 CONTRA	CTOR'S OR LA	NDOWNER	R'S CERTIFICA	TION: This water	er well was (1) construct	ed , (2) re	econstructed.	or (3) plugged ur	der my iurisdic	tien and	was
	n (mo/day/yr)			-7-04	_			_	pest of my knowle	_	//	1
	Contractor's Lice			531					completed on (m			
	usiness name of		3eotechnic	al Services	. Inc				completed of the			
INSTR	JCTIONS: Please	e fill in blanks	s and circle the co	orrect answers. S	end three copi	es to Kansa	s Departn	nent of Health	and Environment,	Bureau of Water	, 1000 S	W
Jackson	n St., Ste. 420, Top	beka, Kansas	s 66612-1367. T	elephone: 913-29	96-5545. Send	one to WA	TER WEL	L OWNER and	d retain one for you	ır records.		