

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																																											
County: Harvey		NW 1/4 NW 1/4 SE 1/4		8		T 24 S		R 2 E W																																																																																											
Distance and direction from nearest town or city street address of well if located within city? Approximately 1 1/2 miles south and 2 1/2 miles west of Halstead																																																																																																			
2 WATER WELL OWNER: City of Wichita RR#, St. Address, Box # : 455 N. Main City, State, ZIP Code : Wichita, KS 67202 Board of Agriculture, Division of Water Resources Application Number: HV006																																																																																																			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL 244.34 ft. ELEVATION: unknown																																																																																																
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center; width: 150px; height: 150px;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>			NW	NE	SW	SE	Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.																																																																																												
			NW	NE																																																																																															
			SW	SE																																																																																															
			WELL'S STATIC WATER LEVEL 34 _____ ft. below land surface measured on mo/day/yr 9-21-01																																																																																																
			Pump test data: Well water was not checked _____ ft. after _____ hours pumping _____ gpm																																																																																																
Est. Yield unknown _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm																																																																																																			
Bore Hole Diameter 42 _____ in. to 244 _____ ft., and _____ in. to _____ ft.																																																																																																			
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well																																																																																																			
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (specify below)																																																																																																			
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well																																																																																																			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted																																																																																																			
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____																																																																																																			
5 TYPE OF BLANK CASING USED:																																																																																																			
① Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____																																																																																																			
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded <input checked="" type="checkbox"/> _____																																																																																																			
7 Fiberglass _____ Threaded _____																																																																																																			
Blank casing diameter 18 _____ in. to 118.62 _____ ft., Dia 18 _____ in. to 166.95 _____ ft., Dia _____ in. to _____ ft.																																																																																																			
Casing height above land surface 24 _____ in., weight 70.59 _____ lbs./ft. Wall thickness or gauge No 375																																																																																																			
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																																																																			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement																																																																																																			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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) _____ ft.																																																																																																			
SCREEN-PERFORATED INTERVALS: From 118.62 _____ ft. to 138.95 _____ ft., From _____ ft. to _____ ft.																																																																																																			
From 166.95 _____ ft. to 242.34 _____ ft., From _____ ft. to _____ ft.																																																																																																			
GRAVEL PACK INTERVALS: From 21 _____ ft. to 244 _____ ft., From _____ ft. to _____ ft.																																																																																																			
From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																																																																			
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																																																																																			
Grout Intervals: From 0 _____ ft. to 21 _____ 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																																																																																																			
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)																																																																																																			
13 Insecticide storage None known																																																																																																			
Direction from well? _____ How many feet? _____																																																																																																			
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>PLUGGING INTERVALS</th></tr></thead><tbody><tr><td>0</td><td>4</td><td>Topsoil</td><td>205</td><td>215</td><td>Sand and gravel, fine, medium</td></tr><tr><td>4</td><td>15</td><td>Clay, brown</td><td>215</td><td>220</td><td>Clay with sand and gravel</td></tr><tr><td>15</td><td>18</td><td>Clay, brown, sandy</td><td>220</td><td>241</td><td>Sand and gravel, fine, medium</td></tr><tr><td>18</td><td>38</td><td>Sand and gravel, fine, medium</td><td>241</td><td>244</td><td>Shale, black</td></tr><tr><td>38</td><td>40</td><td>Clay</td><td></td><td></td><td></td></tr><tr><td>40</td><td>68</td><td>Sand and gravel, fine, medium</td><td></td><td></td><td></td></tr><tr><td>68</td><td>83</td><td>Clay, green</td><td></td><td></td><td></td></tr><tr><td>83</td><td>100</td><td>Sand and gravel, fine, medium</td><td></td><td></td><td></td></tr><tr><td>100</td><td>107</td><td>Clay</td><td></td><td></td><td></td></tr><tr><td>107</td><td>140</td><td>Sand and gravel, fine, medium, some clay</td><td></td><td></td><td></td></tr><tr><td>140</td><td>145</td><td>Clay, tan and green</td><td></td><td></td><td></td></tr><tr><td>145</td><td>166</td><td>Clay, gray, sticky</td><td></td><td></td><td></td></tr><tr><td>166</td><td>198</td><td>Sand and gravel, fine, medium</td><td></td><td></td><td></td></tr><tr><td>198</td><td>205</td><td>Clay and sand and gravel</td><td></td><td></td><td></td></tr></tbody></table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	4	Topsoil	205	215	Sand and gravel, fine, medium	4	15	Clay, brown	215	220	Clay with sand and gravel	15	18	Clay, brown, sandy	220	241	Sand and gravel, fine, medium	18	38	Sand and gravel, fine, medium	241	244	Shale, black	38	40	Clay				40	68	Sand and gravel, fine, medium				68	83	Clay, green				83	100	Sand and gravel, fine, medium				100	107	Clay				107	140	Sand and gravel, fine, medium, some clay				140	145	Clay, tan and green				145	166	Clay, gray, sticky				166	198	Sand and gravel, fine, medium				198	205	Clay and sand and gravel			
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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/year) 9-14-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 9-26-01 under the business name of Clarke Well & Equipment, Inc. by (signature) _____																																																																																																			
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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.																																																																																																			