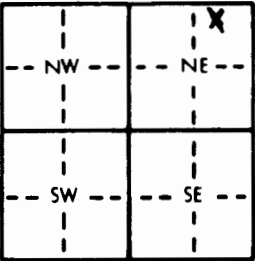


1 LOCATION OF WATER WELL:		Fraction <u>NW 1/4 NE 1/4 NE 1/4</u>		Section Number <u>13</u>	Township Number <u>T 26 S</u>	Range Number <u>R 1W EW</u>
County: <u>Sedgwick</u>						
Distance and direction from nearest town or city street address of well if located within city? <u>6122 N. Edwards Wichita, Kansas</u>						
2 WATER WELL OWNER:		<u>Smith, Richard</u>				
RR#, St. Address, Box # :		<u>129 N. Emporia</u>				
City, State, ZIP Code :		<u>Valley Center, Kansas 67149</u>				
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: <u>40</u> ft. ELEVATION: _____				
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL <u>16</u> ft. below land surface measured on mo/day/yr <u>7-30-91</u>				
		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 <u>1 1/2</u> in. to <u>40</u> ft. and _____ in. to _____ ft.		WELL WATER TO BE USED AS:				
1 Domestic		3 Feedlot		6 Oil field water supply		9 Dewatering
2 Irrigation		4 Industrial		7 Lawn and garden only		10 Monitoring well
5 Public water supply		8 Air conditioning		11 Injection well		12 Other (Specify below)
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____						
Water Well Disinfected? Yes <u>X</u> No _____						
5 TYPE OF BLANK CASING USED:						
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
				7 Fiberglass		SDR-26
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		CASING JOINTS: Glued <u>X</u> Clamped _____				
Casing height above land surface <u>12</u> in., weight <u>2.29</u> lbs./ft. Wall thickness or gauge No. <u>214</u>		Welded _____				
TYPE OF SCREEN OR PERFORATION MATERIAL:		Threaded _____				
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)
						11 Other (specify) _____
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut		11 None (open hole)
1 Continuous slot		3 Mill slot		9 Drilled holes		
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: 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 _____ ft. to _____ 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below)
						None Apparent
Direction from well? _____ How many feet? _____						
FROM		TO		LITHOLOGIC LOG		PLUGGING INTERVALS
0		2		topsoil		
2		9		sandy soil		
9		16		fine sand		
16		21		fine to medium sand		
21		40		fine to medium sand and gravel		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>7-30-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>236</u> This Water Well Record was completed on (mo/day/yr) <u>11-13-91</u> under the business name of <u>Harp Well and Pump Service, Inc.</u> by (signature) <u>Mary Arnold</u>						
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.						