

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>	<u>NW 1/4 NW 1/4 SE 1/4</u>	<u>16</u>	T <u>26</u> S	R <u>2</u> <u>EW</u>

Distance and direction from nearest town or city street address of well if located within city?

Same as below

2 WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #:	Application Number:
City, State, ZIP Code:	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>65</u> ft. ELEVATION:
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	Depth(s) Groundwater Encountered 1. <u>23</u> ft. 2. <u>23</u> ft. 3. <u>23</u> ft.
	WELL'S STATIC WATER LEVEL <u>23</u> ft. below land surface measured on mo/day/yr <u>4-13-88</u>
	Pump test data: Well water was <u>23</u> ft. after <u>20</u> hours pumping <u>20</u> gpm
	Est. Yield <u>75</u> gpm: Well water was <u>23</u> ft. after <u>20</u> hours pumping <u>20</u> gpm
Bore Hole Diameter <u>11</u> in. to <u>65</u> ft., and <u>65</u> in. to <u>65</u> ft.	
WELL WATER TO BE USED AS:	
1 Domestic	5 Public water supply
2 Irrigation	6 Oil field water supply
3 Feedlot	7 Lawn and garden only
4 Industrial	8 Air conditioning
	9 Dewatering
	10 Observation well
	11 Injection well
	12 Other (Specify below)
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted	Water Well Disinfected? Yes <u>X</u> No <u>X</u>

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped
1 Steel	6 Asbestos-Cement	9 Other (specify below)	Welded
2 PVC	7 Fiberglass		Threaded
3 RMP (SR)			
4 ABS			

Blank casing diameter <u>5</u> in. to <u>53</u> ft., Dia. <u>53</u> in. to <u>53</u> ft., Dia. <u>53</u> in. to <u>53</u> ft.
Casing height above land surface <u>12</u> in., weight <u>1159</u> lbs./ft. Wall thickness or gauge No. <u>SDP-26</u>

TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement
1 Steel	8 RMP (SR)	11 Other (specify)
2 Brass	9 ABS	12 None used (open hole)
3 Stainless steel		
4 Galvanized steel		
5 Fiberglass		
6 Concrete tile		

SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	7 Torch cut	10 Other (specify)	
3 Mill slot			
4 Key punched			

SCREEN-PERFORATED INTERVALS:	From <u>53</u> ft. to <u>65</u> ft.	From <u>53</u> ft. to <u>65</u> ft.	From <u>53</u> ft. to <u>65</u> ft.
GRAVEL PACK INTERVALS:	From <u>23</u> ft. to <u>65</u> ft.	From <u>23</u> ft. to <u>65</u> ft.	From <u>23</u> ft. to <u>65</u> ft.

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout intervals: From <u>3</u> ft. to <u>23</u> ft.	From <u>23</u> ft. to <u>65</u> ft.	From <u>65</u> ft. to <u>65</u> ft.	From <u>65</u> ft. to <u>65</u> ft.	From <u>65</u> ft. to <u>65</u> ft.

What is the nearest source of possible contamination:	10 Livestock pens	14 Abandoned water well
1 Septic tank	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	13 Insecticide storage	
4 Lateral lines		
5 Cess pool		
6 Seepage pit		
7 Pit privy		
8 Sewage lagoon		
9 Feedyard		

Direction from well? EAST How many feet? 35

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top so.			
2	19	clay			
19	35	fine sand			
35	36	clay			
36	65	fine to 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) <u>4-13-88</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>318</u> This Water Well Record was completed on (mo/day/year) <u>4-16-88</u> by (signature) <u>Weninger Dull</u>
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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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-3360. Send one to WATER WELL OWNER and retain one for your records.