

1 LOCATION OF WATER WELL: County: <u>Sedgewick</u>		Fraction <u>NE 1/4 NW 1/4 NE 1/4</u>	Section Number <u>24</u>	Township Number <u>T 27 S</u>	Range Number <u>R 1 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>3015 W. Central, Wichita, KS</u>					
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code		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>27</u> ft. ELEVATION: _____ ft.			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr 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 _____ in. to _____ ft., and _____ in. to _____ ft. WELL WATER 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 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No _____			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued _____ Clamped _____			
1 Steel <u>2 PVC</u> 3 RMP (SR) 4 ABS		5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) Welded _____ Threaded <u>X</u>			
Blank casing diameter <u>2"</u> in. to _____ ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.		Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:		SCREEN OR PERFORATION OPENINGS ARE:			
1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel		5 Fiberglass 6 Concrete tile 7 Torch cut 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)			
SCREEN-PERFORATED INTERVALS:		GRAVEL PACK INTERVALS:			
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.			
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.			
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.			
6 GROUT MATERIAL:		What is the nearest source of possible contamination:			
1 Neat cement <u>2 Cement grout</u> 3 Bentonite 4 Other		5 Gauzed wrapped 6 Wire wrapped 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)			
Grout Intervals: From _____ ft. to _____ ft.		How many feet?			
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
		<u>6'</u> <u>27.0</u> <u>Cement Grout - Approx</u> <u>3/4 ft³ of Cement Grout.</u>			
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>11/6/96</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>599</u> This Water Well Record was completed on (mo/day/yr) <u>DEC 4, 1996</u> under the business name of <u>Diamond Environmental Services</u> by (signature) <u>[Signature]</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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.