

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgewick</u>		<u>NE</u> $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$	<u>7</u>	T <u>27</u> S	R <u>1</u> E <u>(1)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1946 Parkdale Ct.</u>					
2 WATER WELL OWNER: <u>Tim Whyte</u>					
RR#, St. Address, Box # : <u>1946 Parkdale Ct</u>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <u>Wichita, KS 67212-6431</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>85</u> ft. ELEVATION: <u>NA</u>			
1 Mile N W E S		Depth(s) Groundwater Encountered 1. <u>23</u> 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. <u>10</u> in. to <u>85</u> 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 <u>(1)</u> Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>(check)</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <u>(check)</u> No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		CASING JOINTS: Glued <u>(check)</u> Clamped _____	
<u>(2)</u> PVC		4 ABS		Welded _____	
		7 Fiberglass		Threaded _____	
Blank casing diameter <u>6</u> in. to <u>2</u> ft., Dia. <u>5</u> in. to <u>65</u> ft., Dia. _____ in. to _____ ft.					
Casing height above land surface <u>18</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		10 Asbestos-cement	
2 Brass		4 Galvanized steel		11 Other (specify) _____	
		6 Concrete tile		12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		<u>(3)</u> Mill slot		8 Saw cut	
2 Louvered shutter		4 Key punched		9 Drilled holes	
				10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>65</u> ft. to <u>85</u> ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>22</u> ft. to <u>85</u> ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: <u>(1)</u> Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals: From <u>2</u> ft. to <u>22</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		10 Livestock pens	
2 Sewer lines		5 Cess pool		11 Fuel storage	
3 Watertight sewer lines		6 Seepage pit		12 Fertilizer storage	
		7 Pit privy		13 Insecticide storage	
		8 Sewage lagoon		14 Abandoned water well	
		9 Feedyard		15 Oil well/Gas well	
				<u>(16)</u> Other (specify below) <u>Retaining Pond</u>	
Direction from well? <u>East</u>		How many feet? <u>120</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	23	Brown Clay			
23	32	Sandy Clay			
32	81	Sandy Gravel			
81	85	Sandy Clay			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, <u>(2)</u> reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>6-13-98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>464</u> This Water Well Record was completed on (mo/day/yr) <u>7-14-98</u> under the business name of <u>Water Well Services Inc.</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.					