

1 LOCATION OF WATER WELL: Fraction <u>SW 1/4 NW 1/4 SE 1/4</u> Section Number <u>11</u> Township Number <u>T 270 S</u> Range Number <u>R 1 E W</u>	
County: <u>Sedgwick</u> Distance and direction from nearest town or city street address of well if located within city? <u>See below</u>	
2 WATER WELL OWNER: <u>Dennis & Mailee Harper</u> RR#, St. Address, Box #: <u>1663 Harlan</u> City, State, ZIP Code: <u>Wichita, KS 67224</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: _____ ft. ELEVATION: _____ ft.
	Depth(s) Groundwater Encountered <u>10</u> ft. 2. _____ ft. 3. <u>7-9-03</u> 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 <u>30</u> gpm; Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter _____ in. to <u>40</u> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 7 Domestic (lawn & garden) 10 Monitoring well 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) 2 PVC 4 ABS 5 Wrought iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below) 7 Fiberglass Blank casing diameter _____ in. to <u>30</u> ft., Dia _____ in. to _____ ft., Dia _____ in. Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. <u>100 Bi</u>	CASING JOINTS: Glued _____ Clamped _____ Welded _____ Threaded _____
TYPE OF SCREEN OR PERFORATION MATERIAL:	
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)	7 PVC 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:	
1 Continuous slot 3 Mil slot 2 Louvered shutter 4 Key punched 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____ ft.	
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____	
Grout Intervals: From <u>3</u> ft. to <u>10</u> 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well? <u>East</u>	10 Livestock pens 14 Abandoned water well 11 Fuel storage 15 Oil well/Gas well 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage How many feet? <u>40</u>
FROM TO LITHOLOGIC LOG	FROM TO PLUGGING INTERVALS
0 6 clay	
6 39 Fine to med sand	
39 40 clay	
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>9-9-03</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>318</u> This Water Well Record was completed on (mo/day/yr) <u>7-9-03</u> under the business name of <u>Weninger Drilling Inc.</u> by (signature) <u>Mailee Harper</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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.	