

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number	
County: SEDGWICK		SE $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$	19		T 27S	S	R 1W EW
Distance and direction from nearest town or city street address of well if located within city? 2434 N. SHEFFORD CT.; WICHITA							
2 WATER WELL OWNER: SHERRY BOEHLKE							
RR#, St. Address, Box # : 2434 N. SHEFFORD CT.				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : WICHITA, KS				Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>65</u> ft. ELEVATION: _____					
		Depth(s) Groundwater Encountered 1. <u>30</u> ft. 2. _____ ft. 3. _____ ft.					
		WELL'S STATIC WATER LEVEL <u>30</u> ft. below land surface measured on mo/day/yr - 9-10-03					
		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>65</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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial <u>Lawn and garden (domestic)</u> 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)		5 Wrought Iron		8 Concrete tile	
2 <u>PVC</u>		4 ABS		6 Asbestos-Cement		9 Other (specify below)	
				7 Fiberglass			
Blank casing diameter <u>5</u> in. to <u>65</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.							
Casing height above land surface <u>16</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>26</u>							
CASING JOINTS: Glued <u>X</u> Clamped _____ Welded _____ Threaded _____							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass		7 <u>PVC</u>	
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)	
						9 ABS	
						10 Asbestos-cement	
						11 Other (specify) _____	
						12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot		3 <u>Mill slot</u>		5 Gauzed wrapped		8 Saw cut	
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes	
				7 Torch cut		10 Other (specify) _____	
						11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>55</u> ft. to <u>65</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>65</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____							
Grout Intervals From <u>4</u> ft. to <u>24</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		10 Livestock pens	
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage	
3 <u>Watertight sewer lines</u>		6 Seepage pit		9 Feedyard		12 Fertilizer storage	
						13 Insecticide storage	
						14 Abandoned water well	
						15 Oil well/ Gas well	
						16 Other (specify below) _____	
Direction from well? NORTH				How many feet? 20			
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	2		TOPSOIL				
2	27		CLAY				
27	33		FINE SAND				
33	41		MED SAND				
41	43		CLAY				
43	65		MED/COARSE 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/yr.) 9-10-03 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/yr.) 9-10-03 under the business name of Chase Drilling by (signature) RICK CHASE							
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S.W. Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.							

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