

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: SEDGWICK		NE ¼ SE ¼ NE ¼	19	T 27S S	R 1W E/W
Distance and direction from nearest town or city street address of well if located within city? 624 S. MAIZE; WICHITA					
2 WATER WELL OWNER: DEBORAH TIPPIN					
RR#, St. Address, Box # : 624 S. MAIZE			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : WICHITA, KS 67209			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 140 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 30 ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr 10/5/04			
		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 10 in. to 140 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>7 Lawn and garden (domestic)</u> 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes X No _____					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued X Clamped _____
2 PVC		4 ABS	7 Fiberglass		Welded _____
Blank casing diameter 5 in. to 140 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 16 in., weight 160 lbs./ft. Wall thickness or gauge No. 26					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
			7 Torch cut	10 Other (specify)	
SCREEN-PERFORATED INTERVALS: From 100 ft. to 140 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 24 ft. to 140 ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other _____					
Grout Intervals From 4 ft. to 24 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	14 Abandoned water well
2 <u>Sewer lines</u>		5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/ Gas well
3 <u>Watertight sewer lines</u>		6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
Direction from well? SOUTH		How many feet? 25			
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	2		TOPSOIL		
2	12		SANDY CLAY		
12	25		FINE SAND		
25	49		GREEN SHALE		
49	80		BLUE SHALE		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 10/5/04 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) 10/30/04		
under the business name of CHASE DRILLING			by (signature) <i>R. Chase</i>		
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW 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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BUREAU OF WATER