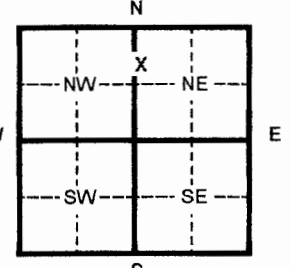


1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number		Range Number	
County: SEDGWICK		SW ¼ NW ¼ NE ¼	7		T 27S S		R 1W EW	
Distance and direction from nearest town or city street address of well if located within city?								
2433 N. RUTGERS; WICHITA								
2 WATER WELL OWNER: MARTY FREDRICK								
RR#, St. Address, Box # : 2433 N. RUTGERS 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 65 ft. ELEVATION:					
			Depth(s) Groundwater Encountered 1 24 ft. 2 _____ ft. 3 _____ ft.					
			WELL'S STATIC WATER LEVEL 24 ft. below land surface measured on mo/day/yr 10/16/04					
			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 65 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 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) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped								
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____								
7 Fiberglass Threaded _____								
Blank casing diameter 5 in. to 65 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) 10 Asbestos-cement								
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 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 55 ft. to 65 ft. From _____ ft. to _____ ft.								
GRAVEL PACK INTERVALS: From 24 ft. to 65 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 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well								
<u>3 Watertight sewer lines</u> 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____								
13 Insecticide storage _____								
Direction from well? WEST How many feet? 17								
FROM		TO	CODE	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS
0		2		TOPSOIL				
2		23		BROWN CLAY				
23		43		FINE/MED SAND				
43		65		MED/COARSE SAND/GRAVEL				
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) 10/16/04 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) 11/9/04								
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 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.								

OFFICE USE ONLY

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