

SE SW NW SE

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <b>Sedgwick</b>	<b>near center 1/4 SE</b>	<b>4</b>	<b>27</b>	<b>1</b> <b>5W</b>

Distance and direction from nearest town or city street address of well if located within city?

**In city limits - 2414 Morning Dew, Wichita, KS**

2	WATER WELL OWNER: <b>Mark Baldwin</b>	Board of Agriculture, Division of Water Resources
	<b>2414 Morning Dew</b>	Application Number: <b>N/A</b>
	RR #, St. Address, Box #: City, State, ZIP Code : <b>Wichita, KS</b>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <b>300., 300., 300., 300 FT.</b>
		WELL'S STATIC WATER LEVEL ..... <b>28</b> ft.  WELL WAS USED AS: 1 Domestic                      5 Public Water Supply                      9 Dewatering 2 Irrigation                      6 Oil Field Water Supply                      10 Monitoring Well 3 Feedlot                          7 Domestic (Lawn & Garden)                      11 Injection Well 4 Industrial                      8 Air Conditioning <input checked="" type="checkbox"/> Other .... <b>Geo-thermal</b>	
Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> ..... If yes, mo/day/yr sample was submitted .....  Water Well Disinfected: Yes ..... No <input checked="" type="checkbox"/> .....			

5	TYPE OF BLANK CASING USED:
	1 Steel      3 RMP (SR)      5 Wrought      7 Fiberglass <input checked="" type="checkbox"/> Other (Specify below) 2 PVC      4 ABS      6 Asbestos-Cement      8 Concrete Tile      ..... <b>3/4" polyethylene</b> .....  Blank casing diameter .... <b>3/4</b> in.      Was casing pulled? Yes ..... No <input checked="" type="checkbox"/> ..... If yes, how much ..... Casing height above or below land surface ..... in.

6	GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout <input checked="" type="checkbox"/> Bentonite    4 Other .....
	Grout Plug Intervals: From ..... <b>0</b> ..... ft. to ..... <b>300</b> ..... ft., From ..... <b>0</b> ..... ft. to ..... <b>300</b> ft., From ..... <b>0</b> ..... to ..... <b>300</b> ft.
	What is the nearest source of possible contamination: <b>300</b>
	1 Septic tank                      6 Seepage pit                      11 Fuel storage                      16 Other (specify below) 2 Sewer lines                      7 Pit privy                          12 Fertilizer storage <input checked="" type="checkbox"/> Watertight sewer lines                      8 Sewage lagoon                      13 Insecticide storage 4 Lateral lines                      9 Feedyard                          14 Abandoned water well 5 Cess pool                          10 Livestock pens                      15 Oil well/Gas well
	Direction from well? ..... <b>East</b> .....      How many feet? ..... <b>25</b> .....

FROM	TO	LOG PLUGGING MATERIALS
0	4	Topsoil
4	22	Clay, brown-red
22	30	Sand, fine to medium
30	65	Sand, fine to coarse
65	70	Clay, gray
70	78	Sand, fine to medium
78	82	Clay, brown
82	125	Sand, fine to medium
125	144	Clay and sand, fine layers
144	161	Sand, fine

161      300      Shale, gray with hard gypsum layers

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was <sup>Geothermal</sup> <del>plugged</del> under my jurisdiction and was completed on (mo/day/year) ..... <b>3/26/09</b> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... <b>138</b> ..... This Water Well Record was completed on (mo/day/year) ..... <b>3/30/09</b> ..... under the business name of ..... <b>Peterson Irrigation, Inc.</b> ..... by (signature) ..... <i>M. Peterson</i> .....
---	---

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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.