

1 LOCATION OF WATER WELL County: SEDGWICK		Fraction NW 1/4 NW 1/4 SW 1/4	Section Number 5	Township Number T 27 S	Range Number R 1W E/W
Distance and direction from nearest town or city?			Street address of well if located within city? 2500 N. MAIZE RD WICHITA, KANSAS		
2 WATER WELL OWNER: RAY THOMPSON RR#, St. Address, Box #: 9030 HARVEST CT. City, State, ZIP Code: WICHITA, KANSAS			Board of Agriculture, Division of Water Resources Application Number:		
3 DEPTH OF COMPLETED WELL: 50 ft. Bore Hole Diameter: 11 in. to . . . ft., and . . . in. to . . . ft.					
Well Water to be used as: 1 Domestic 3 Feedlot 2 Irrigation 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)					
Well's static water level: 15 ft. below land surface measured on 11 month 7 day 1979 year					
Pump Test Data: Well water was . . . ft. after . . . hours pumping . . . gpm Est. Yield gpm: Well water was . . . ft. after . . . hours pumping . . . gpm					
4 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) Casing Joints: Glued X Clamped . . . Welded . . . Threaded . . .					
Blank casing dia: 5 in. to 30 ft. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.					
Casing height above land surface: 12 in. weight . . . lbs./ft. Wall thickness or gauge No: 200					
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 Gauzed wrapped 8 Wire wrapped 9 Torch cut 7 PVC 8 RMP (SR) 9 ABS 8 Saw cut .06 11 None (open hole) 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)					
Screen or Perforation Openings Are: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut .06 9 Drilled holes 10 Other (specify) 11 None (open hole)					
Screen-Perforation Dia: 5 in. to 50 ft. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.					
Screen-Perforated Intervals: From 30 ft. to 50 ft. From . . . ft. to . . . ft.					
Gravel Pack Intervals: From 14 ft. to 50 ft. From . . . ft. to . . . ft.					
5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grouted Intervals: From 40" ft. to . . . ft. From . . . ft. to . . . ft. From . . . ft. to . . . ft.					
What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) NO APPARENT SOURCE					
Direction from well . . . How many feet . . . ? Water Well Disinfected? Yes X No					
Was a chemical/bacteriological sample submitted to Department? Yes . . . No X . . . If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? Yes X No					
If Yes: Pump Manufacturer's name: JACUZZI Model No: 754C HP: 3/4 Volts: 230					
Depth of Pump Intake: 40 ft. Pumps Capacity rated at: 18 gal./min.					
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on . . . 11 month 7 day 1979 year.					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236					
This Water Well Record was completed on . . . 2 month 5 day 1980 year under the business name of HARP WELLS PUMP SERVICE, INC. (signature) m. Arnold					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 2 TOPSOIL			
		2 9 CLAY			
		9 21 FINE SAND			
		21 27 MED SAND			
		27 29 CLAY			
		29 50 MEDIUM SAND			
ELEVATION:					
Depth(s) Groundwater Encountered 1. 15 ft. 2. . . ft. 3. . . ft. 4. . . ft. (Use a second sheet if needed)					

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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