

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number																		
County: <u>Lea</u>		<u>NE 1/4 SW 1/4 SW 1/4</u>	<u>8</u>	<u>T 27 S</u>	<u>R 1 E</u>																		
Distance and direction from nearest town or city?			Street address of well if located within city?																				
			<u>10300 Alamo Wichita KS</u>																				
2 WATER WELL OWNER: <u>Jay Russell</u>																							
RR#, St. Address, Box #: <u>10300 Alamo</u>																							
City, State, ZIP Code: <u>Wichita 67212</u>																							
Board of Agriculture, Division of Water Resources Application Number:																							
3 DEPTH OF COMPLETED WELL: <u>46</u> ft. Bore Hole Diameter: <u>1 1/2</u> in. to <u>28</u> ft. and <u>80</u> in. to <u>80</u> ft.																							
Well Water to be used as:																							
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 7 Lawn and garden only 10 Observation well																							
Well's static water level: <u>18</u> ft. below land surface measured on <u>2</u> month <u>28</u> day <u>80</u> year																							
Pump Test Data: Well water was <u>19</u> ft. after <u>1 1/2</u> hours pumping <u>20</u> gpm																							
Est. Yield <u>80</u> gpm: Well water was <u>19</u> ft. after <u>1 1/2</u> hours pumping <u>20</u> gpm																							
4 TYPE OF BLANK CASING USED:																							
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: <u>Glued</u> Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded																							
Blank casing dia: <u>5</u> in. to <u>3.6</u> ft. Dia: <u>1.50</u> in. to <u>1.50</u> ft. Dia: <u>1.50</u> in. to <u>1.50</u> ft. Dia: <u>1.50</u> in. to <u>1.50</u> ft.																							
Casing height above land surface: <u>12</u> in., weight <u>1.50</u> lbs./ft. Wall thickness or gauge No. <u>200</u>																							
TYPE OF SCREEN OR PERFORATION MATERIAL:																							
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) 12 None used (open hole)																							
Screen or Perforation Openings Are:																							
1 Continuous slot 2 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-Perforation Dia: <u>5</u> in. to <u>5</u> ft. Dia: <u>5</u> in. to <u>5</u> ft. Dia: <u>5</u> in. to <u>5</u> ft. Dia: <u>5</u> in. to <u>5</u> ft.																							
Screen-Perforated Intervals: From <u>36</u> ft. to <u>46</u> ft. From <u>36</u> ft. to <u>46</u> ft. From <u>36</u> ft. to <u>46</u> ft. From <u>36</u> ft. to <u>46</u> ft.																							
Gravel Pack Intervals: From <u>13</u> ft. to <u>46</u> ft. From <u>13</u> ft. to <u>46</u> ft. From <u>13</u> ft. to <u>46</u> ft. From <u>13</u> ft. to <u>46</u> ft.																							
5 GROUT MATERIAL:																							
1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grouted Intervals: From <u>3</u> ft. to <u>13</u> ft. From <u>3</u> ft. to <u>13</u> ft. From <u>3</u> ft. to <u>13</u> ft. From <u>3</u> ft. to <u>13</u> ft.																							
What is the nearest source of possible contamination:																							
1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below) 13 Watertight sewer lines																							
Direction from well: <u>E</u> How many feet: <u>90</u> ? Water Well Disinfected? <u>Yes</u> No																							
Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, date sample																							
was submitted <u> </u> month <u> </u> day <u> </u> year: Pump Installed? Yes <u>No</u> No																							
If Yes: Pump Manufacturer's name: <u> </u> Model No. <u> </u> HP <u> </u> Volts <u> </u>																							
Depth of Pump Intake <u> </u> ft. Pumps Capacity rated at <u> </u> 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 <u>2</u> month <u>28</u> day <u>80</u> year																							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>318</u>																							
This Water Well Record was completed on <u>6</u> month <u>29</u> day <u>80</u> year under the business																							
name of <u>Weninger Drilling</u> by (signature) <u>James Weninger</u>																							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG																					
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>FROM</td> <td>TO</td> <td>LITHOLOGIC LOG</td> </tr> <tr> <td><u>0</u></td> <td><u>2</u></td> <td><u>Top soil</u></td> </tr> <tr> <td><u>2</u></td> <td><u>18</u></td> <td><u>Red clay</u></td> </tr> <tr> <td><u>18</u></td> <td><u>28</u></td> <td><u>Fine sand</u></td> </tr> <tr> <td><u>28</u></td> <td><u>29</u></td> <td><u>Red clay</u></td> </tr> <tr> <td><u>29</u></td> <td><u>46</u></td> <td><u>Med. gravel</u></td> </tr> </table>				FROM	TO	LITHOLOGIC LOG	<u>0</u>	<u>2</u>	<u>Top soil</u>	<u>2</u>	<u>18</u>	<u>Red clay</u>	<u>18</u>	<u>28</u>	<u>Fine sand</u>	<u>28</u>	<u>29</u>	<u>Red clay</u>	<u>29</u>	<u>46</u>	<u>Med. gravel</u>
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ELEVATION:																							
Depth(s) Groundwater Encountered		(Use a second sheet if needed)																					
1. <u> </u> ft. 2. <u> </u> ft. 3. <u> </u> ft. 4. <u> </u> ft.																							

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

T 27

R 1

EW

SEC.

NE 1/4 SW 1/4 SW 1/4