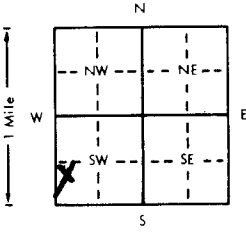


1 LOCATION OF WATER WELL		Fraction			Section Number		Township Number		Range Number		
County: SEDGWICK		NW 1/4 SW 1/4 SW 1/4			17		T 27 S		R 1 W E/W		
Distance and direction from nearest town or city?					Street address of well if located within city? 10234 Alamo Ct., Wichita, Ks.						
2 WATER WELL OWNER:		Doug Roland									
RR#, St. Address, Box # :		10234 Alamo Ct.									
City, State, ZIP Code :		Wichita, Ks.									
		Board of Agriculture, Division of Water Resources Application Number:									
3 DEPTH OF COMPLETED WELL . . . 55 . . . ft. Bore Hole Diameter . . . 11 . . . in. to . . . ft., and . . . in. to . . . 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 . . . 25 . . . ft. below land surface measured on . . . 3 . . . month . . . 30 . . . day . . . 81 . . . 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 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) Cer-Mac Welded . . .											
7 Fiberglass SDR-26 Styrene Threaded . . .											
Blank casing dia . . . 5 . . . in. to . . . 35 . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.											
Casing height above land surface . . . 12 . . . in., weight . . . lbs./ft. Wall thickness or gauge No . . . 203											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement Same											
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) . . . SDR-26 . . .											
12 None used (open hole)											
Screen or Perforation Openings Are:											
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut .06 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 . . . 5 . . . in. to . . . 55 . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.											
Screen-Perforated Intervals: From . . . 35 . . . ft. to . . . 55 . . . ft., From . . . ft. to . . . ft.											
From . . . ft. to . . . ft., From . . . ft. to . . . ft.											
Gravel Pack Intervals: From . . . 14 . . . ft. to . . . 55 . . . ft., From . . . ft. to . . . ft.											
From . . . ft. to . . . ft., From . . . ft. to . . . ft.											
5 GROUT MATERIAL:											
1 Neat cement 2 Cement grout 3 Bentonite 4 Other . . .											
Grouted Intervals: From . . . 40" . . . ft. to . . . 14 . . . ft., From . . . ft. to . . . ft., From . . . ft. to . . . 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 . . . West . . . How many feet . . . 125 . . . ? 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 . . . Fairbanks Morse . . . Model No. . . 75 . . . HP . . . 3/4 . . . Volts . . . 230 . . .											
Depth of Pump Intake . . . 45 . . . 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 . . . 3 . . . month . . . 30 . . . day . . . 81 . . . 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 . . . 6 . . . month . . . 8 . . . day . . . 1981 . . . year under the business											
name of Harp Well & Pump Serv., Inc. by (signature) M. Arnold											
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:											
											
ELEVATION:											
Depth(s) Groundwater Encountered 1. . . 25 . . . 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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