

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>	<u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>19</u>	<u>T</u> <u>27</u> <u>S</u>	<u>R</u> <u>1W</u> <u>E/W</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>103 So. Prescott Wichita, Ks.</u>					
2 WATER WELL OWNER:					
RR#, St. Address, Box # :		<u>Alan McLeod</u> <u>103 So. Prescott</u>		Board of Agriculture, Division of Water Resources	
City, State, ZIP Code :		<u>Wichita, Ks.</u>		Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:					
		4 DEPTH OF COMPLETED WELL.....80..... ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1... <u>27</u>ft. 2.....ft. 3.....ft. WELL'S STATIC WATER LEVEL <u>27</u>ft. below land surface measured on mo/day/yr <u>9-30-88</u> Pump test data: Well water wasft. after hours pumping gpm Est. Yield gpm: Well water wasft. after hours pumping gpm Bore Hole Diameter <u>11</u>in. toft., andin. toft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial <u>7 Lawn and garden only</u> 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes.....No ☒ ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes ☒ No			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued ☒ Clamped	
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded	
		7 Fiberglass Cer-Mac styrene SDR-26		Threaded	
Blank casing diameter <u>5</u>in. to <u>60</u>ft., Diain. toft., Diain. toft.					
Casing height above land surface <u>12</u>in., weight <u>1.59</u>lbs./ft. Wall thickness or gauge No. <u>.203</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass		7 PVC 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 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-PERFORATED INTERVALS: From <u>60</u>ft. to <u>80</u>ft., Fromft. toft., Fromft. toft.					
GRAVEL PACK INTERVALS: From <u>24</u>ft. to <u>80</u>ft., Fromft. toft., Fromft. toft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From <u>4</u>ft. to <u>24</u>ft., Fromft. toft., Fromft. toft.					
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			
3 Watertight sewer lines 6 Seepage pit 9 Feedyard		12 Fertilizer storage 16 Other (specify below)			
Direction from well? <u>N.W.</u>		How many feet? <u>35</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	topsoil			
3	22	clay			
22	52	fine sand			
52	80	medium sand			
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/year) <u>9-30-88</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>236</u> This Water Well Record was completed on (mo/day/yr) <u>5-15-89</u> under the business name of <u>Harp Well and Pump Service, Inc.</u> by (signature) <u>Mary Arnold</u>					
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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.					