

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number						
County: Sedgwick		SE NW ¼ SW ¼ NE ¼	19	T 27 S	R 1W						
Distance and direction from nearest town or city street address of well if located within city?											
11009 Shade Circle Wichita, Ks.											
2 WATER WELL OWNER:		Barry Saengerhausen RR#, St. Address, Box # : 11009 Shade Circle City, State, ZIP Code : Wichita, Ks.									
		Board of Agriculture, Division of Water Resources Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 110 ft. ELEVATION:									
N <table border="1" style="margin: auto; border-collapse: collapse;"><tr><td style="padding: 5px;">NW</td><td style="padding: 5px;">NE</td></tr><tr><td style="text-align: center; padding: 5px;">X</td><td></td></tr><tr><td style="padding: 5px;">SW</td><td style="padding: 5px;">SE</td></tr></table> S		NW	NE	X		SW	SE	Depth(s) Groundwater Encountered 1. 27 ft. 2. . ft. 3. . ft. WELL'S STATIC WATER LEVEL . 27 ft. below land surface measured on mo/day/yr 7-22-89 Pump test data: Well water was . ft. after . hours pumping . gpm Est. Yield . gpm: Well water was . ft. after . hours pumping . gpm Bore Hole Diameter . 11 in. to . 110 ft., and . in. to . ft. 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 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes . No X . If yes, mo/day/yr sample was submitted . Water Well Disinfected? Yes X No			
		NW	NE								
		X									
		SW	SE								
		5 TYPE OF BLANK CASING USED:									
		Blank casing diameter . 5 in. to . 100 ft., Dia . in. to . ft., Dia . in. to . ft. Casing height above land surface . 12 in., weight . 1.59 lbs./ft. Wall thickness or gauge No. . 203									
TYPE OF SCREEN OR PERFORATION MATERIAL:											
SCREEN OR PERFORATION OPENINGS ARE:											
SCREEN-PERFORATED INTERVALS:											
GRAVEL PACK INTERVALS:											
6 GROUT MATERIAL:											
Grout Intervals: From . 4 ft. to . 24 ft., From . ft. to . ft., From . ft. to . ft.											
What is the nearest source of possible contamination:											
Direction from well? West How many feet? 25											
FROM		TO		LITHOLOGIC LOG							
FROM		TO		PLUGGING INTERVALS							
0		3		topsoil							
3		18		clay							
18		33		fine sand							
33		90		clay							
90		97		fine sand and clay							
97		110		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) 7-22-89 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 (mo/day/yr) 10-16-89 under the business name of Harp Well and Pump Service, Inc. by (signature) Mary Arnold											
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.											