

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		NW 1/4 SE 1/4 SE 1/4	20	T 27 S	R 1W E/W
Distance and direction from nearest town or city street address of well if located within city?					
106 S. Byron Rd. Wichita, Ks.					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
106 S. Byron Rd.					
City, State, ZIP Code :		Wichita, Ks.			
3 LOCATE WELL'S LOCATION WITHIN AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 60 ft. ELEVATION:			
1 Mile		Depth(s) Groundwater Encountered 1. 25 ft. 2. 4-23-90 ft. 3. 4-23-90 ft.			
		WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr			
		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 _____ ft., and _____ in. to _____ ft.		WELL WATER TO BE USED AS:			
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)		5 Public water supply 8 Air conditioning 11 Injection well			
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			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued X Clamped _____			
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____		2 PVC 160 4 ABS 7 Fiberglass SDR-26 Threaded _____			
Blank casing diameter _____ in. to 40 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height above land surface: 12 in., weight 2.29 lbs./ft. Wall thickness or gauge No. .214			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____		2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)			
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes		2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.		GRAVEL PACK INTERVALS: From 40 ft. to 60 ft., From _____ ft. to _____ ft.			
From _____ ft. to _____ ft., From _____ ft. to _____ ft.		From 24 ft. to 60 ft., From _____ ft. to _____ ft.			
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____		Grout Intervals: From 4 ft. to 24 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well		2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)			
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage		How many feet? 25			
Direction from well? North					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	topsoil			
3	23	clay			
23	35	medium sand			
35	60	fine sand			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-23-90 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) 5-31-90 under the business name of Harp Well and Pump Service, Inc. by (signature) <i>Mary Arnold</i>					
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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					