

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number				
County: <u>Sedgwick</u>		<u>SW 1/4</u> <u>SW 1/4</u> <u>SW 1/4</u>	<u>20</u>	<u>T 27 S</u>	<u>R 1W EW</u>				
Distance and direction from nearest town or city street address of well if located within city?									
<u>10200 West Maple Wichita, Ks.</u>									
2 WATER WELL OWNER:		Maple Gardens Clinic							
RR#, St. Address, Box # :		<u>10200 West Maple</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: <u>85</u> ft. ELEVATION:							
N 1 Mile W E S <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. <u>20</u> ft. 2. ft. 3. ft.			
		NW	NE						
		SW	SE						
		WELL'S STATIC WATER LEVEL <u>20</u> ft. below land surface measured on mo/day/yr <u>11-30-88</u>							
		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 <u>11</u> in. to 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 <u>9 Dewatering</u> 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 <u>X</u>; If yes, mo/day/yr sample was submitted				Water Well Disinfected? Yes <u>X</u> No					
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped							
1 Steel 3 RMP (SR)		Welded							
2 PVC 4 ABS		Threaded							
Blank casing diameter <u>5</u> in. to <u>65</u> ft., Dia in. to ft., Dia in. to ft.									
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:		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 <u>9 Drilled holes</u>									
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From <u>65</u> ft. to <u>85</u> ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From <u>24</u> ft. to <u>85</u> ft., From ft. to ft.									
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., 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 <u>None Apparent</u>									
Direction from well?		How many feet?							
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	3	topsoil							
3	18	clay							
18	25	fine sand							
25	40	clay							
40	57	fine sand							
57	85	medium 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) <u>11-30-88</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>4-15-89</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.									