

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number
County: Sedgwick		NW ¼ SE ¼ SW ¼	21		T 27 S	R 1W E/W

Distance and direction from nearest town or city street address of well if located within city?

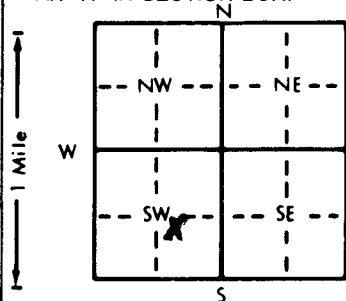
135 S. Soccora Wichita, Ks.

2	WATER WELL OWNER:	<u>Carriker, Bob</u>
	RR#, St. Address, Box # :	135 S. Soccora
	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 30 ft. ELEVATION: BASEMENT FLOOR



4. DEPTH OF COMPLETED WELL..... 30..... ft. ELEVATION: BASEMENT FLOOR.....
 Depth(s) Groundwater Encountered 1..... ft. 2..... ft. 3..... ft.

WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr 12-3-90

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.....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	9 Dewatering	12 Other (Specify below)
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2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was sub

mitted Water Well Disinfected? Yes ☒ No ☐

5	TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped Welded Threaded
	1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	
	<u>2 PVC</u>	4 ABS	7 Fiberglass		

Blank casing diameter 1 1/4 in. to ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface 3ft. in. weight lbs./ft. Wall thickness or gauge No.

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.
	From ft. to ft.,	From ft. to ft.
GRAVEL PACK INTERVALS:	From ft. to 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	0	ft. to	4	ft.	From		ft. to		ft.

What is the nearest source of possible contamination:			
1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
			13 Insecticide storage
			14 Abandoned water well
			15 Oil well/Gas well
			16 Other (specify below)

Direction from well? East How many feet? 55 ft.

[illegible]

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) 12-3-90 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) 3-10-91 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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.