

1 LOCATION OF WATER WELL: County: <u>Sedwick</u>	Fraction SW <u>NE</u> $\frac{1}{4}$ <u>N/W</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	Section Number <u>24</u>	Township Number T <u>27</u> S	Range Number R <u>1</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city?				

2 WATER WELL OWNER: E. Markham
RR#, St. Address, Box #: 217 Alvena
City, State, ZIP Code: Wichita, Kansas

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..... 39 ft. ELEVATION:

3.9. ft. ELEVATION:

A map showing a 2x2 grid with cardinal directions N, S, E, W. The quadrants are labeled NW, NE, SW, and SE. An 'X' is marked in the SW quadrant. A scale bar on the left indicates 1 mile.

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 999 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 _____ 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)
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:
---	----------------------------

5 Wrought iron

8 Concrete tile

CASING JOINTS Glued Clamped

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	welded
2 PVC	4 ABS	7 Fiberglass		Threaded.....

Blank casing diameter 6 in. to ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface 12 in., weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

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:

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 31 ft. to 37 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 okay
Grout Interval: From 999 ft. to 0 ft. From _____ ft. to _____ 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	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)
			13 Insecticide storage	NONE

Direction from well? _____ How many feet? _____

[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) 1-29-1992 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) 5-18-93 under the business name of _____ by (signature) Barbara Risley

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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.