

1) LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																									
County: <u>SENGWICK</u>		<u>SE 1/4 SE 1/4 SW 1/4</u>		<u>25</u>		<u>T 27 S</u>		<u>R 1 EW</u>																																																																									
Distance and direction from nearest town or city street address of well if located within city? <u>3402 W HARRY</u> <u>MW 1</u>																																																																																	
2) WATER WELL OWNER: <u>ANK FREICHT</u>																																																																																	
RR#, St. Address, Box # : <u>3402 W HARRY</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>21</u> ft. ELEVATION:																																																																															
		Depth(s) Groundwater Encountered <u>14</u> ft. 2. ft. 3. ft.																																																																															
		WELL'S STATIC WATER LEVEL <u>14</u> 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 <u>8</u> in. to <u>21</u> ft., and _____ in. to _____ ft.																																																																															
WELL WATER TO BE USED AS:																																																																																	
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden only <u>10 Monitoring well</u> 12 Other (Specify below)																																																																																	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>✓</u> ; If yes, mo/day/yr sample was submitted _____																																																																																	
Water Well Disinfected? Yes _____ No <u>✓</u>																																																																																	
5) TYPE OF BLANK CASING USED:																																																																																	
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ <u>2 PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ Blank casing diameter <u>2</u> in. to <u>11</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: <u>7 PVC</u> 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:																																																																																	
1 Continuous slot <u>3 Mill slot</u> 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes SCREEN-PERFORATED INTERVALS: From <u>11</u> ft. to <u>21</u> ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>9</u> ft. to <u>21</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																																																	
6) GROUT MATERIAL: <u>3 Bentonite</u> 4 Other _____																																																																																	
Grout Intervals: From _____ ft. to _____ 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 <u>11 Fuel storage</u> 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below)																																																																																	
Direction from well? <u>S</u> How many feet? <u>50</u>																																																																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>9</u></td> <td><u>SILTY CLAY</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>9</u></td> <td><u>TO</u></td> <td><u>SAND</u></td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	<u>0</u>	<u>9</u>	<u>SILTY CLAY</u>				<u>9</u>	<u>TO</u>	<u>SAND</u>																																																									
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7) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>11/15/91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u> This Water Well Record was completed on (mo/day/yr) <u>12/9</u> under the business name of <u>Rayne Weston</u> by (signature) <u>[Signature]</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																	