

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: SEDGWICK		NE 1/4 SW 1/4 NE 1/4	29	T 27 S	R 1W E 10
Distance and direction from nearest town or city?			Street address of well if located within city? WICHITA, KANSAS		
2 WATER WELL OWNER: JAMES P. SMALLEY			Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box #: 640 S. WESTFIELD			Application Number:		
City, State, ZIP Code: WICHITA, KANSAS					
3 DEPTH OF COMPLETED WELL: 120 ft. Bore Hole Diameter: 11 in. to ... ft., and ... in. to ... ft.					
Well Water to be used as:					
1 Domestic		3 Feedlot		5 Public water supply	
2 Irrigation		4 Industrial		6 Oil field water supply	
		7 Lawn and garden only		8 Air conditioning	
				9 Dewatering	
				10 Observation well	
				11 Injection well	
				12 Other (Specify below)	
Well's static water level: 30 ft. below land surface measured on 10 month 23 day 1979 year					
Pump Test Data					
Est. Yield		Well water was		ft. after	
gpm:		Well water was		ft. after	
				hours pumping	
				gpm	
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
				8 Concrete tile	
				9 Other (specify below)	
				Casing Joints: Glued X Clamped	
				Welded	
				Threaded	
Blank casing dia: 5 in. to 105 ft., Dia ... in. to ... ft., Dia ... in. to ... ft.					
Casing height above land surface: 12 in., weight ... lbs./ft. Wall thickness or gauge No. 200					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
				8 RMP (SR)	
				9 ABS	
				10 Asbestos-cement	
				11 Other (specify)	
				12 None used (open hole)	
Screen or Perforation Openings Are:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut	
				8 Saw cut 106	
				9 Drilled holes	
				10 Other (specify)	
				11 None (open hole)	
Screen-Perforation Dia: 5 in. to 120 ft., Dia ... in. to ... ft., Dia ... in. to ... ft.					
Screen-Perforated Intervals: From 105 ft. to 120 ft., From ... ft. to ... ft., From ... ft. to ... ft.					
Gravel Pack Intervals: From 20 ft. to 120 ft., From ... ft. to ... ft., From ... ft. to ... ft.					
5 GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
4 Other					
Grouted Intervals: From 40 ft. to 14 ft., From ... ft. to ... ft., From ... ft. to ... ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Cess pool		7 Sewage lagoon	
2 Sewer lines		5 Seepage pit		8 Feed yard	
3 Lateral lines		6 Pit privy		9 Livestock pens	
				10 Fuel storage	
				11 Fertilizer storage	
				12 Insecticide storage	
				13 Watertight sewer lines	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well: EAST How many feet: 60 ? Water Well Disinfected? Yes X No					
Was a chemical/bacteriological sample submitted to Department? Yes X No X If yes, date sample was submitted ... month ... day ... year: Pump Installed? Yes X No					
If Yes: Pump Manufacturer's name: STA-RITE Model No. 8 SERIES HP 1/2 Volts 115					
Depth of Pump Intake: 50 ft. Pumps Capacity rated at 18 gal./min.					
Type of pump: Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 10 month 24 day 1979 year					
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 2 month 14 day 1980 year under the business name of HARP WELL & PUMP SERVICE, INC. (signature) M. Arnold					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 3 TOPSOIL			
		3 17 CLAY			
		17 33 FINE SAND			
		33 50 MED SAND			
		50 53 CLAY			
		53 95 FINE SAND			
		95 120 MED SAND			
ELEVATION:					
Depth(s) Groundwater Encountered 1. 30 ft. 2. ... ft. 3. ... ft. 4. ... ft. (Use a second sheet if needed)					

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

27

R

1

EN

SEC

NE 1/4 SW 1/4 NE 1/4