

LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		SW ¼ SE ¼ NE ¼	29	T 27 S	R 1 W E/W
Distance and direction from nearest town or city street address of well if located within city?					
631 Byron Rd.			Wichita, Ks.		
WATER WELL OWNER: D. W. Hackler			Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box #: 631 Byron Rd.			Application Number:		
City, State, ZIP Code: Wichita, Kansas					
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		DEPTH OF COMPLETED WELL.....120..... ft. ELEVATION:			
N +-----+ NW NE +-----+ X SW SE +-----+ S W E Mile		Depth(s) Groundwater Encountered 1.....35..... ft. 2..... ft. 3..... ft.			
		WELL'S STATIC WATER LEVEL35..... ft. below land surface measured on mo/day/yr ..7-7-83.....			
		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...11....in. toft., and.....in. toft.			
		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)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well			
Was a chemical/bacteriological sample submitted to Department? Yes.....No..X.....; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes X No					
TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter5.....in. to80..... ft., Dia.....in. toft., Dia.....in. toft.				8 Concrete tile	
Casing height above land surface12..... in., weight1.59..... lbs./ft. Wall thickness or gauge No.203.....				9 Other (specify below)	
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 PVC	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		6 Wire wrapped		9 Drilled holes	
2 Louvered shutter		7 Torch cut		10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From.....80..... ft. to120..... ft., From.....ft. to.....ft.					
GRAVEL PACK INTERVALS: From.....14..... ft. to120..... ft., From.....ft. to.....ft.					
GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From.....4..... ft. to14..... ft., From.....ft. to.....ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well? West How many feet? 110					
FROM TO LITHOLOGIC LOG			FROM TO LITHOLOGIC LOG		
0 3 Topsoil					
3 22 Clay					
22 47 Fine Sand					
47 59 Clay					
59 73 Fine Sand					
73 80 Clay					
80 120 Fine Sand					
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) ..7-7-83..... 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) ..10-28-83..... under the business name of Harp Well & 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					