

1 LOCATION OF WATER WELL:		Fraction <u>SE SW NW SE</u>	Section Number <u>15 13</u>	Township Number <u>T 27 28 S</u>	Range Number <u>R 2 24 W E/W</u>
County: SEDGWICK		<u>NE</u> $\frac{1}{4}$ <u>SE</u> <u>SW</u> $\frac{1}{4}$	<u>15</u> <u>13</u>	<u>T 27</u> <u>28</u> <u>S</u>	<u>R 2</u> <u>24</u> <u>W</u> <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city? 12609 BIRCH, WICHITA, KS					
2 WATER WELL OWNER: ART WORTH					
RR#, St. Address, Box # : 12609 BIRCH					
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 <u>70</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered: 1. <u>30</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>30</u> ft. below land surface measured on mo/day/yr <u>9-8-03</u>			
		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>10</u> in. to <u>70</u> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5. Public water supply 8. Air conditioning 11. Injection well 1. Domestic 3. Feed lot 6. Oil field water supply 9. Dewatering 12. Other (Specify below) 2. Irrigation 4. Industrial <u>7. Lawn and garden (domestic)</u> 10. Monitoring well			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <u>X</u> No _____					
5 TYPE OF BLANK CASING USED:					
1. Steel 3. RMP (SR) 5. Wrought Iron 8. Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____ 2. <u>PVC</u> 4. ABS 6. Asbestos-Cement 9. Other (specify below) Welded _____ 7. Fiberglass Threaded _____					
Blank casing diameter: <u>5</u> in. to <u>70</u> ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.					
Casing height above land surface: <u>16</u> in., weight: <u>160</u> lbs./ft. Wall thickness or gauge No. <u>26</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1. Steel 3. Stainless steel 5. Fiberglass 8. RMP (SR) 10. Asbestos-cement 2. Brass 4. Galvanized steel 6. Concrete tile 9. ABS 11. Other (specify) _____ 12. None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1. Continuous slot 3. <u>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 7. Torch cut 10. Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From <u>60</u> ft. to <u>70</u> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>24</u> ft. to <u>70</u> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1. Neat cement 2. Cement grout 3. <u>Bentonite</u> 4. Other _____					
Grout Intervals From <u>4</u> ft. to <u>24</u> 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. <u>Watertight sewer lines</u> 6. Seepage pit 9. Feedyard 12. Fertilizer storage 16. Other (specify below) 13. Insecticide storage					
Direction from well? <u>WEST</u> How many feet? <u>30</u>					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	3		TOPSOIL		
3	16		CLAY		
16	23		GREEN SHALE		
23	54		BLUE SHALE		
54	61		LIMIE SHALE		
61	70		BLUE SHALE		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) <u>9-8-03</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>611</u> This Water Well Record was completed on (mo/day/yr) <u>9-8-03</u>					
under the business name of <u>Chase Drilling</u> by (signature) <u>RICK CHASE</u>					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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