

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: SEDGWICK		SE ¼ SW ¼ NW ¼	24	T 27S S	R 2W E/W
Distance and direction from nearest town or city street address of well if located within city? 15326 HENDRYX CT.; WICHITA, KS					
2 WATER WELL OWNER: JACK SMALLEY					
RR#, St. Address, Box # : 15326 HENDRYX CT.					
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 100 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 35 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 35 ft. below land surface measured on mo/day/yr 10/17/04 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 10 in. to 100 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 7 <u>Lawn and garden (domestic)</u> 10 Monitoring 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 _____			
		5 TYPE OF BLANK CASING USED:			
		1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____ 2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter 5 in. to 100 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 16 in., weight 160 lbs./ft. Wall thickness or gauge No. 26			
		TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 <u>PVC</u> 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 RMP (SR) 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 40 ft. to 100 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 24 ft. to 100 ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____					
Grout Intervals From 4 ft. to 24 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? SOUTHWEST How many feet? 30					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	3		TOPSOIL		
3	21		CLAY		
21	37		FINE SAND		
37	78		BLUE SHALE		
78	81		RED SHALE		
81	100		BLUE SHALE		
RECEIVED					
NOV 18 2004					
BUREAU OF WATER					
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/yr) 10/17/04 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/yr) 11/9/04					
under the business name of CHASE DRILLING by (signature) <u>R. Chase</u>					

OFFICE USE ONLY

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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.