

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: SEDGWICK		NW 1/4 NE 1/4 NW 1/4	11 #4	T 27 S	R 2 E		
Distance and direction from nearest town or city?			Street address of well if located within city?				
			14603 W. 21st WICHITA, KANSAS				
2 WATER WELL OWNER: GENE FALKOWSKI							
RR#, St. Address, Box # : 14603 W. 21st			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : WICHITA, KANSAS			Application Number:				
3 DEPTH OF COMPLETED WELL: 10.5 ft. Bore Hole Diameter: 1 1/2 in. to ft., and in. to ft.							
Well Water to be used as:							
1 Domestic 3 Feedlot		5 Public water supply		8 Air conditioning 11 Injection well			
2 Irrigation 4 Industrial		6 Oil field water supply		9 Dewatering 12 Other (Specify below)			
		(Lawn and garden only)		10 Observation well			
Well's static water level: 33 ft. below land surface measured on month 17 day 1980 year							
Pump Test Data							
Est. Yield		Well water was ft. after hours pumping		gpm			
gpm:		Well water was ft. after hours pumping		gpm			
4 TYPE OF BLANK CASING USED:							
1 Steel		5 Wrought iron		8 Concrete tile			
2 PVC		6 Asbestos-Cement		9 Other (specify below)			
4 ABS		7 Fiberglass		Casing Joints: Glued X Clamped			
				Welded			
				Threaded			
Blank casing dia in. to 5 in. to 12 3/4 ft., Dia in. to ft., Dia in. to ft.							
Casing height above land surface 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 .06			
				11 None (open hole)			
Screen-Perforation Dia. 5 in. to 10 1/2 ft., Dia in. to ft., Dia in. to ft.							
Screen-Perforated Intervals: From 30 ft. to 10 1/2 ft., From ft. to ft., From ft. to ft.							
Gravel Pack Intervals: From 30 ft. to 10 1/2 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)			
				NO APPARENT SOURCE			
Direction from well How many feet ? Water Well Disinfected? Yes X No							
Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, date sample							
was submitted month day year: Pump Installed? Yes X No							
If Yes: Pump Manufacturer's name JACUZZI Model No. 754C HP 3/4 Volts 230							
Depth of Pump Intake 95 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 month 17 day 1980 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 month 4 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	18	CLAY			
		18	21	FINE SAND			
		21	105	GREY SHALE			
ELEVATION:							
Depth(s) Groundwater Encountered 1. 65 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

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EW

SEC.

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NW 1/4 NE 1/4 NW 1/4