

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>31</u>	T <u>27</u> S	R <u>4</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>1 W, 1 1/2 N. Cheney</u>					
2 WATER WELL OWNER: <u>Greg Reno</u>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>RT. 2 Box 53A</u>		Application Number:			
City, State, ZIP Code: <u>Cheney, KS. 67025</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>56</u> ft. ELEVATION: <u>50</u> ft.			
		Depth(s) Groundwater Encountered 1. <u>20</u> ft. 2. <u>38</u> ft. 3. <u>50</u> ft.			
		WELL'S STATIC WATER LEVEL <u>16</u> ft. below land surface measured on <u>11-8-94</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>56</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 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 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:		CASING JOINTS: <u>Glued</u> _____ Clamped _____			
1 Steel 3 RMP (SR)		Welded _____			
2 <u>PVC</u> 4 ABS		Threaded _____			
Blank casing diameter _____ in. to _____ ft.		Dia _____ in. to _____ ft.			
Casing height above land surface _____ in., weight _____ lbs./ft.		Wall thickness or gauge No. <u>SDR26</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 <u>PVC</u> 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		11 Other (specify) _____			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 <u>Saw cut</u> 11 None (open hole)			
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes					
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS:		From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft.			
6 GROUT MATERIAL:		4 Other <u>Baroid - Hole Plug</u>			
1 Neat cement 2 Cement grout 3 Bentonite					
Grout intervals: From _____ ft. to _____ ft.		From _____ ft. to _____ ft.			
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 <u>Oil well</u> Gas well		16 Other (specify below)			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage					
Direction from well? <u>S.</u>		How many feet? <u>1,500</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Sandy Soil			
4	6	Clay			
6	56	Red 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/year) <u>11-8-94</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>395</u> This Water Well Record was completed on (mo/day/year) <u>11-28-94</u>					
under the business name of <u>Chaig Roberts Co.</u> by (signature) <u>Craig Roberts</u>					
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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