

|                         |                             |                |                 |                     |
|-------------------------|-----------------------------|----------------|-----------------|---------------------|
| LOCATION OF WATER WELL: | Fraction                    | Section Number | Township Number | Range Number        |
| County: <i>Sedgwick</i> | <i>SE 1/4 SE 1/4 SE 1/4</i> | <i>2</i>       | T <i>28</i> S   | R <i>1</i> <i>W</i> |

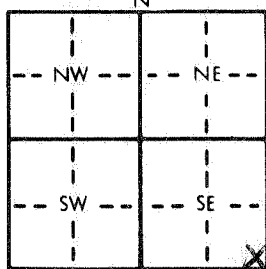
Distance and direction from nearest town or city street address of well if located within city?

*31st South & West St. Wichita*

WATER WELL OWNER: *Wildcat Const Co*  
 RR#, St. Address, Box # : *4421 N. Harry St.*  
 City, State, ZIP Code : *Wichita, Ks. 67209*

*Well No. 3*  
 Board of Agriculture, Division of Water Resources  
 Application Number:

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL ..... ft. ELEVATION: .....

Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.

WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr .....

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 ..... in. to ..... 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 Observation well

Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No

TYPE OF BLANK CASING USED:

5 Wrought iron

8 Concrete tile

CASING JOINTS: Glued ..... Clamped .....

1 Steel 3 RMP (SR)

6 Asbestos-Cement

9 Other (specify below)

Welded .....

2 PVC 4 ABS

7 Fiberglass

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. ....

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel 3 Stainless steel

5 Fiberglass

7 PVC

10 Asbestos-cement

2 Brass 4 Galvanized steel

6 Concrete tile

8 RMP (SR)

11 Other (specify) .....

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot

3 Mill slot

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 ..... ft. to ..... ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

3 GROUT MATERIAL:

1 Neat cement

2 Cement grout

3 Bentonite

4 Other .....

Grout intervals: From ..... ft. to ..... 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 Watertight sewer lines 6 Seepage pit

9 Feedyard

12 Fertilizer storage

16 Other (specify below)

13 Insecticide storage

Direction from well?

How many feet?

| FROM | TO | LITHOLOGIC LOG                                                                                    | FROM | TO | LITHOLOGIC LOG |
|------|----|---------------------------------------------------------------------------------------------------|------|----|----------------|
|      |    | <i>Pulled Screen &amp; Casing. Back filled with Clay &amp; Bentonite from 11 feet to Surface.</i> |      |    |                |

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/year) *9/24/85* and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. *102* This Water Well Record was completed on (mo/day/yr) *11/6/85*under the business name of *Layne Western Co. Wichita* by (signature) *W. R. Hook*

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.