

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Sedgwick</u>		NW 1/4 NW 1/4 SW 1/4		8		T 28 S		R 1 E/W	
Distance and direction from nearest town or city street address of well if located within city? <u>1407 South Walnut, Wichita, KS XXXXXXXX</u>									
2 WATER WELL OWNER:		Dugan Truck Line, c/o John Dugan							
RR#, St. Address, Box # :		Route 1							
City, State, ZIP Code :		Clearwater, KS 67026							
		Board of Agriculture, Division of Water Resources Application Number: <u>not required</u>							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>114</u> ft. ELEVATION: <u>unknown</u>							
		Depth(s) Groundwater Encountered <u>1. 36' 4"</u> ft. 2. <u> </u> ft. 3. <u> </u> ft.							
		WELL'S STATIC WATER LEVEL <u>36' 4"</u> ft. below land surface measured on mo/day/yr <u>9-8-83</u>							
		Pump test data: Well water was <u>not ck'd</u> ft. after <u> </u> hours pumping <u> </u> gpm							
		Est. Yield <u>unknown</u> gpm: Well water was <u> </u> ft. after <u> </u> hours pumping <u> </u> gpm							
		Bore Hole Diameter <u>9</u> in. to <u>114</u> ft. and <u> </u> in. to <u> </u> 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 <u> </u> No <u>X</u> ; If yes, mo/day/yr sample was submitted <u> </u>							
		Water Well Disinfected? Yes <u>X</u> No <u> </u>							
5 TYPE OF BLANK CASING USED:		CASING JOINTS: <u>Glued XX</u> Clamped <u> </u>							
1 Steel 3 RMP (SR)		6 Asbestos-Cement 9 Other (specify below) Welded <u> </u>							
2 PVC 4 ABS		7 Fiberglass <u> </u> Threaded <u> </u>							
Blank casing diameter <u>5</u> in. to <u>104</u> ft. Dia <u> </u> in. to <u> </u> ft.									
Casing height above land surface <u>33</u> in., weight <u>2,277</u> lbs./ft. Wall thickness or gauge No. <u>.214</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement							
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		11 Other (specify) <u> </u>							
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		12 None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 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) <u>FACTORY SLOT</u>									
SCREEN-PERFORATED INTERVALS: From <u>104</u> ft. to <u>114</u> ft. From <u> </u> ft. to <u> </u> ft.									
GRAVEL PACK INTERVALS: From <u>91</u> ft. to <u>111</u> ft. From <u> </u> ft. to <u> </u> ft.									
ANNULAR FILL From <u>10</u> ft. to <u>70</u> ft. From <u> </u> ft. to <u> </u> ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u> </u>									
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft. From <u>70</u> ft. to <u>91</u> ft. From <u> </u> ft. to <u> </u> 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 Oil well/Gas well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage <u>Zone from 23' to 43'</u>									
Direction from well? <u> </u>		How many feet? <u> </u> contains chlorides rptd 9000 ppm							
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG				
0	4	Topsoil							
4	18	Red clay							
18	20	Tan clay							
20	23	Soft sandy clay							
23	43	Fine sand & gravel							
43	48	Tan clay							
48	89	Gray & blue clay							
89	102	Buff sandy clay							
102	112	Sand - Med. - Coarse - Traces of gravel							
112	113	Cemented sand - very hard							
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) <u>9-8-83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/yr) <u>9-21-83</u> under the business name of <u>Clarke Well & Eq., Inc.</u> by (signature) <u>Clarke Well & Eq., Inc.</u>									
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.									