

1] LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <i>Sedgewick</i>		<i>NW 1/4 SE 1/4 SE 1/4</i>	<i>10</i>	T <i>28</i> S	R <i>1</i> EW

2] WATER WELL OWNER: Chuck Hadsell
RR#, St. Address, Box # : 3700 S Gilda Cnt
City, State, ZIP Code : Wichita Kansas

Board of Agriculture, Division of Water Resources
Application Number: _____

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

N			
	NW	NE	
	SW	SE	
S			

W E

4 DEPTH OF COMPLETED WELL: 51 ft. ELEVATION: _____

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

WELL'S STATIC WATER LEVEL 999 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 8 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
2 Irrigation	4 Industrial	9 Dewatering
	7 <u>Lawn and garden only</u>	12 Other (Specify below)
	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 _____ No (X)

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: <u>Glued</u>	Clamped
<u>2 PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded	
		7 Fiberglass		Threaded	

Blank casing diameter 6 in. to 11 ft., Dia. 11 in. to 11 ft., Dia. 11 in. to 11 ft.

Casing height above land surface 11 in., weight 11 lbs./ft. Wall thickness or gauge No. 11

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<u>7 PVC</u>	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify)
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 <u>Saw cut</u>	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<u>9 Drilled holes</u>	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From NA ft. to NA ft., From NA ft. to NA ft., From NA ft. to NA ft.

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

6] GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other <i>Red & Gray Clay</i>
Grout Intervals:		From <i>199</i> ft. to <i>0</i> ft.	From _____ ft. to _____ ft.	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 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	<i>None</i>	
Direction from well?			How many feet?		

[illegible]

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) 8-2-86 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) 6-20-93 under the business name of _____ by (signature) James A. Piskley

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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.