

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		<u>NW 1/4 SE 1/4 NE 1/4</u>	<u>33</u>	<u>T 28 S</u>	<u>R 1 E</u>
Distance and direction from nearest town or city: <u>3 mi West of Haysville</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>Abbott Laboratories</u>			<u>MW #4 Shallow Well</u>		
RR #, St. Address, Box # : <u>12291</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Wichita, Kansas 67277</u>			Application Number:		
3 DEPTH OF COMPLETED WELL: <u>76</u> ft. Bore Hole Diameter: <u>11</u> in. to <u>76</u> 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)
		7 Lawn and garden only	<u>10 Observation well</u>		
Well's static water level: <u>44' 10"</u> ft. below land surface measured on _____ month <u>27</u> day <u>79</u> year					
Pump Test Data					
Est. Yield		gpm:	Well water was	ft. after	hours pumping
			Well water was	ft. after	hours pumping
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: Glued ☒ Clamped _____
<u>2 PVC</u>		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded _____
Blank casing dia: <u>5</u> in. to <u>52</u> ft. Dia <u>5</u> in. to <u>72 to 76</u> ft. Dia _____ in. to _____ ft.					
Casing height above land surface: _____ in., weight _____ lbs./ft. Wall thickness or gauge No. <u>214</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify)
					12 None used (open hole)
Screen or Perforation Openings Are:					
1 Continuous slot		3 Mill slot	5 Gauzed wrapped	<u>8 Saw cut</u>	
2 Louvered shutter		4 Key punched	6 Wire wrapped	11 None (open hole)	
			7 Torch cut	9 Drilled holes	
Screen-Perforation Dia: <u>5</u> in. to _____ ft. Dia _____ in. to _____ ft.					
Screen-Perforated Intervals:					
From _____ ft. to <u>52</u> ft.		From _____ ft. to <u>72</u> ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
Gravel Pack Intervals:					
From _____ ft. to <u>42</u> ft.		From _____ ft. to <u>76</u> ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
5 GROUT MATERIAL:					
1 Neat cement		<u>2 Cement grout</u>	3 Bentonite	4 Other _____	
Grouted Intervals: From _____ ft. to <u>42</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Cess pool	<u>7 Sewage lagoon</u>	10 Fuel storage	
2 Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	
3 Lateral lines		6 Pit privy	9 Livestock pens	12 Insecticide storage	
				13 Watertight sewer lines	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well: <u>Southeast</u> How many feet: <u>900</u>					
? Water Well Disinfected? Yes _____ No ☒					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, date sample was submitted _____ month _____ day _____ year					
Pump Installed? Yes _____ No ☒					
If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____					
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.					
Type of pump: 1 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 <u>NOV</u> day <u>26</u> year <u>79</u>					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u>					
This Water Well Record was completed on _____ month <u>April</u> day <u>23</u> year <u>80</u>					
name of <u>Layne Western Co</u> by (signature) <u>[Signature]</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG	
		0 2 Top Soil			
		2 8 Clay			
		8 16 Sandy Clay			
		16 37 Fine to Coarse Sand			
		37 41 Clay			
		41 72 Fine to Coarse Sand			
		72 76 Clay			
		75 76 Sand			
ELEVATION:					
Depth(s) Groundwater Encountered 1. <u>44' 10"</u> 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 SE 1/4 NE 1/4