

Copy Book

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number					
County: <u>Sedgwick</u>		<u>SE 1/4 NE 1/4 NE 1/4</u>		<u>36</u>		<u>T 28 S</u>		<u>R 1 E</u>					
Distance and direction from nearest town or city? <u>Approx 2 miles SW of Wichita</u>					Street address of well if located within city? <u>6603 S. Meridian</u>								
2 WATER WELL OWNER: <u>Myers, MAI</u>					Board of Agriculture, Division of Water Resources								
RR#, St. Address, Box #: <u>6603 S. Meridian</u>					Application Number:								
City, State, ZIP Code: <u>Wichita KS 67233</u>													
3 DEPTH OF COMPLETED WELL <u>42</u> ft. Bore Hole Diameter <u>9</u> in. to <u>15</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		10 Observation well							
Well's static water level <u>28</u> ft. below land surface measured on <u>Aug</u> month <u>17</u> day <u>1982</u> year													
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm													
Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm													
4 TYPE OF BLANK CASING USED:													
1 Steel		③ RMP (SR)		5 Wrought iron		8 Concrete tile		Casing Joints: Glued <u>X</u> Clamped _____					
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded _____					
				7 Fiberglass				Threaded _____					
Blank casing dia <u>6</u> in. to <u>37</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.													
Casing height above land surface <u>18</u> in., weight _____ lbs./ft. Wall thickness or gauge No <u>SDR 210</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		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-Perforation Dia <u>6</u> in. to <u>42</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.													
Screen-Perforated Intervals: From <u>37</u> ft. to <u>42</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
5 GROUT MATERIAL:													
1 Neat cement		2 Cement grout		③ Bentonite		4 Other _____							
Grouted Intervals: From <u>0</u> ft. to <u>15</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
What is the nearest source of possible contamination:													
① Septic tank		4 Cess pool		7 Sewage lagoon		10 Fuel storage		14 Abandoned water well					
2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage		15 Oil well/Gas well					
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage		16 Other (specify below)					
Direction from well <u>South</u> How many feet <u>75</u> ? Water Well Disinfected? Yes _____ No <u>X</u>													
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes _____ No <u>X</u>													
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 <u>Aug</u> month <u>17</u> day <u>1982</u> year													
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>295</u>													
This Water Well Record was completed on <u>Aug</u> month <u>17</u> day <u>1982</u> year under the business name of <u>Protheroe Pump &amp; Well Service</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		3		Drk. Brn. Sand							
		3		21		Lt. Brn. Clay							
		21		27		Gray Clay							
		27		35		Lt. Tan Fine Sand							
		35		42		Brn med Course Sand							
ELEVATION:													
Depth(s) Groundwater Encountered 1. <u>28</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.