

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Sedgwick		SW ¼ NW ¼ SW ¼	29	T 29 S	R 1 EW
Distance and direction from nearest town or city street address of well if located within city? From Clearwater, KS! 2m. Eas East and ¾ mile South					
2 WATER WELL OWNER: John Dalborn RR#, St. Address, Box # : 414 East Park City, State, ZIP Code : Clearwater, KS 67026					
Board of Agriculture, Division of Water Resources Application Number: 451828					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 46 ft. ELEVATION: _____ ft.			
		Depth(s) Groundwater Encountered 6 1 15 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 6 ft. below land surface measured on mo/day/yr 8-26-04 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 200 gpm; Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: ☒ Domestic ☐ Feedlot ☐ Public water supply ☐ Air conditioning ☐ Injection well ☒ Irrigation ☐ Industrial ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ 7 Domestic (lawn & garden) ☐ Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ ; If yes, mo/day/yrs sample was submitted _____ Water Well Disinfected? Yes ☒ No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel ☒ PVC Blank casing diameter 10 in. to 26 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 24 in., weight 10 lbs./ft. Wall thickness or gauge No. 38"		5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) _____		CASING JOINTS: Glued ☒ Clamped _____ Welded _____ Threaded _____	
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 2 Brass 3 Stainless Steel 4 Galvanized Steel 5 Fiberglass 6 Concrete tile		8 RMP (SR) 9 ABS 10 Asbestos-Cement 11 Other (Specify) _____ 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 2 Louvered shutter ☒ Mill slot 4 Key punched		5 Guazed wrapped 6 Wire wrapped 7 Torch cut		8 Saw cut 9 Drilled holes 10 Other (specify) _____ 11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From 26 ft. to 46 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 46 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement Grout Intervals: From 3 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		2 Cement grout 3 Bentonite 4 Other _____			
What is the nearest source of possible contamination:					
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit		7 Pit privy 8 Sewage lagoon 9 Feedyard		10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) None Open Field	
Direction from well?					
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
0	3	Topsoil			
3	23	Clay			
23	46	Medium Sand to Small Gravel			
46		Shale			
Well #3 North Well					
RECEIVED					
SEP 15 2004					
BUREAU OF WATER					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8-26-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 238 This Water Well Record was completed on (mo/day/yr) 9-13-04 under the business name of Weninger Irrigation by (signature) [Signature]					

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.