

1 LOCATION OF WATER WELL:		Fraction Near Center		Section Number	Township Number	Range Number
County: <u>Sedgwick</u>		$\frac{1}{4}$ $\frac{1}{4}$ NW $\frac{1}{4}$		31	T 29 S	R 1 <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? From 79th St. & Meridian in Wichita, <u>7 1/4</u> mile west west, 5 miles south $\frac{1}{4}$ east on west side of road.						
2 WATER WELL OWNER: Bill Mason						
RR#, St. Address, Box # : Route 1						
City, State, ZIP Code : Peck, KS 67120						
Board of Agriculture, Division of Water Resources						
Application Number: not available						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>62</u> ft. ELEVATION: <u>unknown</u>				
		Depth(s) Groundwater Encountered 1. <u>28</u> ft. 2. <u>28</u> ft. 3. <u>28</u> ft.				
		WELL'S STATIC WATER LEVEL <u>28</u> ft. below land surface measured on mo/day/yr <u>6/24/81</u>				
		Pump test data: Well water was <u>Not ck'd</u> ft. after <u> </u> hours pumping <u> </u> gpm				
		Est. Yield <u>750</u> gpm: Well water was <u> </u> ft. after <u> </u> hours pumping <u> </u> gpm				
		Bore Hole Diameter: <u>24</u> in. to <u>62</u> in. to <u> </u> in. to <u> </u> in.				
		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)				
		<u>2 Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Observation 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: Glued.....Clamped.....						
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) <u>Welded</u> ...X.....						
Blank casing diameter <u>1.6</u> in. to <u>34</u> in. to <u> </u> in. to <u> </u> in. to <u> </u> in. to <u> </u> in. to <u> </u> in. to <u> </u> in.						
Casing height above land surface <u>12</u> in., weight <u>31.75</u> lbs./ft. Wall thickness or gauge No. <u>188</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).....						
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) <u>Doerr Bridge Slot</u>						
SCREEN-PERFORATED INTERVALS: From <u>34</u> ft. to <u>62</u> ft. From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft.						
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>61</u> ft. From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft. From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft.						
What is the nearest source of possible contamination:						
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well						
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well						
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage <u>16 Other (specify below)</u>						
<u>FIELD</u>						
Direction from well? How many feet?						
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
0	3	Topsoil				
3	11	Brown & lt. green clay w/some thin XXXX caliche streaks				
11	13	Fine sand w/streak dk. brown clay				
13	24	Fine sand & gravel, some med. thin streaks yellow clay 19-24-				
24	29	Brown clay, some sandy w/fine-coarse sand & gravel streaks				
29	37	Fine sand & gravel, some med. strks sandy clay 32-34				
37	60	Fine-med sand & gravel, some coarse streaks thin clay streks 38-39', streak yellow clay @ 50'				
60	61	Hard yellow - green clay				
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>6/24/81</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>8/20/81</u> under the business name of <u>CLARKE WELL & EQUIPMENT, INC.</u> by (signature) <u>[Signature]</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.						