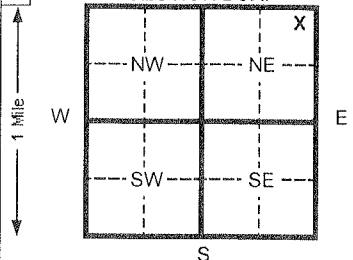


RR#, St. Address, Box # : 6200 S. Ridge Rd.  
City, State, ZIP Code : Wichita, KS 67215

Board of Agriculture, Division of Water Resources  
Application Number:

4 DEPTH OF COMPLETED WELL 10 ft. ELEVATION: 1286.26 (TOC)



Depth(s) Groundwater Encountered 1 \_\_\_\_\_ ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL \_\_\_\_\_ 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 10 ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS:

|              |              |                              |                    |                          |
|--------------|--------------|------------------------------|--------------------|--------------------------|
| 1 Domestic   | 3 Feed lot   | 6 Oil field water supply     | 8 Air conditioning | 11 Injection well        |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden (domestic) | 9 Dewatering       | 12 Other (Specify below) |
|              |              |                              | 10 Monitoring well |                          |

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No ☒ If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes \_\_\_\_\_ No ☒

|   |                 |   |                       |                      |         |
|---|-----------------|---|-----------------------|----------------------|---------|
| 5 | Wrought Iron    | 8 | Concrete tile         | CASING JOINTS: Glued | Clamped |
| 6 | Asbestos-Cement | 9 | Other (specify below) | Welded               |         |

|         |            |                   |                         |        |
|---------|------------|-------------------|-------------------------|--------|
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | 9 Other (specify below) | Welded |
| 2 PVC   | 4 ABS      | 7 Fiberglass      |                         | Flush  |

Blank casing diameter **2** in. to **6** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **36** in., weight **0.703** lbs./ft. Wall thickness or gauge No. **SCH. 40**

|         |                    |                 |            |                          |
|---------|--------------------|-----------------|------------|--------------------------|
| 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) _____ |                     |

|                              |      |          |        |           |          |  |        |     |
|------------------------------|------|----------|--------|-----------|----------|--|--------|-----|
| SCREEN-PERFORATED INTERVALS: | From | <b>6</b> | ft. to | <b>10</b> | ft. From |  | ft. to | ft. |
|                              | From |          | ft. to |           | ft. From |  | ft. to | ft. |
| GRAVEL PACK INTERVALS:       | From | <b>5</b> | ft. to | <b>10</b> | ft. From |  | ft. to | ft. |
|                              | From |          | ft. to |           | ft. From |  | ft. to | ft. |

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other \_\_\_\_\_

Grout Intervals From 0 ft. to 5 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

| What is the nearest source of possible contamination: |                 |                 | 10                     | 11 | 12 | 13 | 14                       | 15 | 16 |
|-------------------------------------------------------|-----------------|-----------------|------------------------|----|----|----|--------------------------|----|----|
| 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  |    |    |    | 16 Other (specify below) |    |    |
|                                                       |                 |                 | 13 Insecticide storage |    |    |    |                          |    |    |

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/yr) 07/26/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 08/11/11 under the business name of Geotechnical Services Inc. by (signature) 

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.