

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Sumner</b>		<b>NE ¼ NE ¼ NE ¼</b>	<b>21</b>	<b>T 32 S</b>	<b>R 2 W</b>
Distance and direction from nearest town or city street address of well if located within city? <b>Approximately 0.5 miles south and 0.75 miles east of Mayfield on County Roads, Sumner County</b>					
2 WATER WELL OWNER: <b>McConnell Air Force Base</b>					
RR#, St. Address, Box # : <b>2801 S. Rock Road</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Wichita, KS 67221</b>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>46</b> ft. ELEVATION: <b>1279.78 (FM)</b>			
		Depth(s) Groundwater Encountered 1 <b>37</b> ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL <b>19.4</b> ft. below land surface measured on mo/day/yr <b>11/07/07</b>			
		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 <b>6</b> in. to <b>46</b> ft. and _____ in. to _____ ft.			
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well					
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) <b>10 Monitoring well</b>					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes _____ No <b>X</b>					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<b>2 PVC</b>		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass	<b>Threaded Flush</b>		
Blank casing diameter <b>2</b> in. to <b>36</b> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <b>30</b> in., weight <b>0.703</b> lbs./ft. Wall thickness or gauge No. <b>SCH. 40</b>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) _____
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		<b>3 Mill slot</b>	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>36</b> ft. to <b>46</b> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>31</b> ft. to <b>46</b> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <b>3 Bentonite</b> 4 Other _____					
Grout Intervals From <b>0</b> ft. to <b>31</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ 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	16 Other (specify below)
Direction from well?			How many feet?		
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
<b>0</b>	<b>8</b>		<b>Gravelly Silty Clay, red brown</b>		
<b>8</b>	<b>10</b>		<b>Gravel, brown, clayey</b>		
<b>10</b>	<b>14</b>		<b>Gravelly Clay, red brown</b>		
<b>14</b>	<b>18</b>		<b>Shale, weathered, red brown</b>		
<b>18</b>	<b>20</b>		<b>Limestone, weathered, buff</b>		
<b>20</b>	<b>22</b>		<b>Shale, weathered, red</b>		
<b>22</b>	<b>24</b>		<b>Limestone, weathered, buff</b>		
<b>24</b>	<b>37</b>		<b>Shale, weathered to unweathered, red to gray</b>		
<b>37</b>	<b>44</b>		<b>Limestone, gray</b>		
<b>44</b>	<b>46</b>		<b>Shale, black to red</b>		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1) constructed</b> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) <b>10/31/07</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>531</b> This Water Well Record was completed on (mo/day/yr) <b>01/17/08</b> under the business name of <b>Geotechnical Services Inc.</b> by (signature) <i>James A. J...</i>					
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.					

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