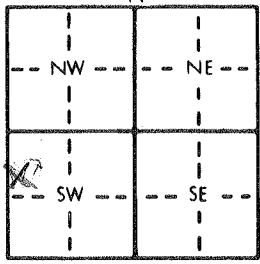


1 LOCATION OF WATER WELL: Fraction SW 1/4 NW 1/4 SW 1/4 Section Number 20 Township Number T 25 S Range Number R 10 EW
 County: Sedgwick
 Distance and direction from nearest town or city street address of well if located within city?
See below

2 WATER WELL OWNER: Brian Coopersmith
 RR#, St. Address, Box #: 9506 N. Broadway Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Valley Center, KS 67147 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 4 DEPTH OF COMPLETED WELL: 51 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 21 ft. below land surface measured on mo/day/yr 9-2-97
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 10 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 11 in. to 51 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial
 5 Public water supply 6 Oil field water supply 7 Lawn and garden only
 8 Air conditioning 9 Dewatering 10 Monitoring well
 11 Injection well 12 Other (Specify below) _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS
 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass
 8 Concrete tile 9 Other (specify below) _____
 CASING JOINTS: Glued Clamped _____
 Welded _____
 Threaded _____
 Blank casing diameter 5 in. to 29 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 240 lbs./ft. Wall thickness or gauge No. 160 PSI
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel
 5 Fiberglass 6 Concrete tile 7 PVC 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 3 Mill slot 4 Key punched
 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes
 10 Other (specify) _____ 11 None (open hole) _____
 SCREEN-PERFORATED INTERVALS: From 29 ft. to 51 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 21 ft. to 51 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 3 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 3 ft. to 21 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 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) _____
 Direction from well? South How many feet? 6

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>29</u>	<u>fine sand</u>			
<u>29</u>	<u>30</u>	<u>medium sand</u>			
<u>30</u>	<u>51</u>	<u>shale</u>			

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) 9-2-97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 318 This Water Well Record was completed on (mo/day/yr) 9-9-97 under the business name of Weninger Drilling Inc. by (signature) Michelle Becker

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.