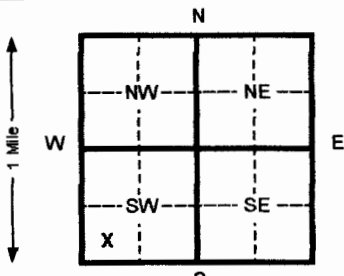


1 LOCATION OF WATER, WELL: County: SEDGWICK	Fraction SW ¼ NW ¼ SW ¼	Section Number 34	Township Number T 25S S	Range Number R 1E EW																																																																																				
Distance and direction from nearest town or city street address of well if located within city? 1900 E. 78TH ST. N.; VALLEY CENTER																																																																																								
WATER WELL OWNER: LONNIE BAKER RR#, St. Address, Box #: 1900 E. 78TH ST. N. City, State, ZIP Code: VALLEY CENTER, KS																																																																																								
Board of Agriculture, Division of Water Resources Application Number:																																																																																								
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL 120 ft. ELEVATION: Depth(s) Groundwater Encountered 1 23 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 23 ft. below land surface measured on mo/day/yr 12/1/04 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 10 in. to 120 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 Lawn and garden (domestic) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes X No _____																																																																																						
5 TYPE OF BLANK CASING USED: 1 PVC 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter 5 in. to 120 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 16 in., weight 160 lbs./ft. Wall thickness or gauge No. 26 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____ 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 3 Mill slot 6 Wire wrapped 9 Drilled holes 4 Key punched 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 110 ft. to 120 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 24 ft. to 120 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 4 ft. to 24 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) 13 Insecticide storage Direction from well? SOUTH How many feet? 70																																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td></td> <td>TOPSOIL</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>11</td> <td></td> <td>CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>11</td> <td>17</td> <td></td> <td>SILTY CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>17</td> <td>21</td> <td></td> <td>CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>21</td> <td>26</td> <td></td> <td>FINE SAND</td> <td></td> <td></td> <td></td> </tr> <tr> <td>26</td> <td>29</td> <td></td> <td>CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>29</td> <td>120</td> <td></td> <td>COARSE SAND/GRAVEL</td> <td></td> <td></td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>					FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	2		TOPSOIL				2	11		CLAY				11	17		SILTY CLAY				17	21		CLAY				21	26		FINE SAND				26	29		CLAY				29	120		COARSE SAND/GRAVEL																															
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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) 12/1/04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/yr) 12/21/04 under the business name of CHASE DRILLING by (signature) <i>R Chase</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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