

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|--|-----------------|--|----------------------------------------------------------------------------------------|--|--------------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Fraction                                                                                           |  | Section Number                                         |  | Township Number |  | Range Number                                                                           |  |                    |  |
| County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | NE 1/4 SE 1/4 NE 1/4                                                                               |  | 20                                                     |  | T 26 S          |  | R 1 <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">EW</span> |  |                    |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>5115 N BROADWAY WICHITA KANSAS</u>                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| 2 WATER WELL OWNER: <u>Bettie McKee</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| RR#, St. Address, Box # : <u>2800 Wedgewood</u> Board of Agriculture, Division of Water Resources                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| City, State, ZIP Code : <u>Wichita Kansas 67204</u> Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 4 DEPTH OF COMPLETED WELL: <u>24.0'</u> ft. ELEVATION: <u>98.58'</u>                               |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Depth(s) Groundwater Encountered 1. <u>15.0'</u> ft. 2. _____ ft. 3. _____ ft.                     |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | WELL'S STATIC WATER LEVEL <u>14.4'</u> ft. below land surface measured on mo/day/yr <u>7-26-91</u> |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 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 <u>8"</u> in. to _____ ft., and _____ in. to _____ ft.                          |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 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)                |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well                                |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>XX</u> ; If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| Water Well Disinfected? Yes _____ No <u>XX</u>                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| 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) Welded _____                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| 7 Fiberglass _____ Threaded <u>Flush</u> <u>Jointed</u>                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| Blank casing diameter <u>2"</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| Casing height above land surface _____ in., weight <u>703</u> lbs./ft. Wall thickness or gauge No. <u>154</u>                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| 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 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 <u>4.5'</u> ft. to <u>23.75'</u> ft., From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| From _____ ft. to _____ ft., From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| GRAVEL PACK INTERVALS: From <u>2.5'</u> ft. to <u>23.75'</u> 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 <u>5'</u> ft. to <u>2.5'</u> 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? <u>South</u> How many feet? <u>75'</u>                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | TO                                                                                                 |  | LITHOLOGIC LOG                                         |  | FROM            |  | TO                                                                                     |  | PLUGGING INTERVALS |  |
| 0.0'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 0.5'                                                                                               |  | Gravel                                                 |  |                 |  |                                                                                        |  |                    |  |
| 0.5'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 4.0'                                                                                               |  | Silt, clayey.                                          |  |                 |  |                                                                                        |  |                    |  |
| 4.0'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 7.0'                                                                                               |  | Clay, fine sand.                                       |  |                 |  |                                                                                        |  |                    |  |
| 7.0'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 14.0'                                                                                              |  | Sand, fine grain, well sorted.                         |  |                 |  |                                                                                        |  |                    |  |
| 14.0'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | 15.0'                                                                                              |  | Sand, fine to medium grains, sorted, clean.            |  |                 |  |                                                                                        |  |                    |  |
| 15.0'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | 24.0'                                                                                              |  | Sand, fine to medium grains, sorted, clean, saturated. |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |
| 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>07-15-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>07-22-91</u> under the business name of <u>Geotechnical Services, Inc.</u> by (signature) <u>Alison J. Owen</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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.                                                                                                                           |  |                                                                                                    |  |                                                        |  |                 |  |                                                                                        |  |                    |  |

OFFICE USE ONLY

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