

<b>[1] LOCATION OF WATER WELL:</b> County: <u>Sedgwick</u>		Fraction <u>SE ¼ SE ¼ NW ¼</u>	Section Number <u>24</u>	Township Number <u>T 27 S</u>	Range Number <u>R 1 E W</u>																																																																																																
Distance and direction from nearest town or city street address of well if located within city? <u>5530 E. Central; Wichita, Ks</u>																																																																																																					
<b>[2] WATER WELL OWNER:</b> <u>LBT Partnership</u> RR#, St. Address, Box # : <u>605W. 47th SE.</u> City, State, ZIP Code : <u>K.C. Mo. 64112</u> Board of Agriculture, Division of Water Resources Application Number:																																																																																																					
<b>[3] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>[4] DEPTH OF COMPLETED WELL .....</b> <u>15'</u> <b>ft. ELEVATION:</b> ..... ft. Depth(s) Groundwater Encountered ..... ft. 2 ..... ft. 3 ..... ft. WELL'S STATIC WATER LEVEL <u>10.30'</u> ft. below land surface measured on mo/day/yr <u>10/12/03</u> . Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm WELL WATER TO BE USED AS: <u>1 Domestic</u> 3 Feedlot     6 Oil field water supply     8 Air conditioning     11 Injection well 2 Irrigation     4 Industrial     7 Domestic (lawn & garden)     (10) Dewatering     12 Other (Specify below) Was a chemical/bacteriological sample submitted to Department? Yes ..... No <u>X</u> ; If yes, mo/day/yrs sample was submitted _____ Water Well Disinfected? Yes ..... No <u>(No)</u>																																																																																																			
<b>[5] TYPE OF BLANK CASING USED:</b> 1 Steel                  3 RMP (SR) <u>2 PVC</u> 4 ABS Blank casing diameter <u>2.375</u> in. to <u>5'</u> Dia ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft. Casing height above land surface <u>Flush Mt.</u> in., weight ..... lbs./ft. Wall thickness or gauge No <u>Sch 40</u> <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> 1 Steel                  3 Stainless Steel                  5 Fiberglass                  8 RMP (SR) 2 Brass                 4 Galvanized Steel                 6 Concrete tile                 9 ABS <b>SCREEN OR PERFORATION OPENINGS ARE:</b> 1 Continuous slot <u>3 Mill slot</u> 5 Guazed wrapped                  8 Saw cut                  11 None (open hole) 2 Louvered shutter                 4 Key punched                  6 Wire wrapped                  9 Drilled holes 3 Torched cut SCREEN-PERFORATED INTERVALS: From <u>15'</u> ft. to <u>5'</u> ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From <u>15'</u> ft. to <u>4'</u> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																																																																																					
<b>[6] GROUT MATERIAL:</b> 1 Neat cement                  2 Cement grout <u>③ Bentonite</u> 4 Other <u>Cement</u> Grout intervals: From <u>4' @ 2'</u> ft. to ..... ft., From <u>2' @ ②</u> ft. to <u>0'</u> 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 <u>② Sewer lines</u> 5 Cess pool                  8 Sewage lagoon                 11 Fuel storage                  15 Oil well/Gas well <u>③ Watertight sewer lines</u> 6 Seepage pit                 9 Feedyard                  12 Fertilizer storage                 16 Other (specify below) _____ Direction from well? <u>North</u> How many feet? <u>15'</u>																																																																																																					
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<b>[7] CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>10/8/03</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>732</u> This Water Well Record was completed on (mo/day/yr) <u>10/14/03</u> under the business name of <u>J.B. Services</u> by (signature) <u>James Buber</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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.																																																																																																					