

|                                                                                                                                                                                                                                                                                                          |             |                                                                                        |                                             |                |  |                 |  |               |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------|---------------------------------------------|----------------|--|-----------------|--|---------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                |             | Fraction                                                                               |                                             | Section Number |  | Township Number |  | Range Number  |  |
| County: <b>Sedgwick</b>                                                                                                                                                                                                                                                                                  |             | <b>NW ¼ SE ¼ NW ¼</b>                                                                  |                                             | <b>28</b>      |  | <b>T 27 S</b>   |  | <b>R 1 EW</b> |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>1202 S Washington Wichita, Kansas 67211</b>                                                                                                                                                        |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 2 WATER WELL OWNER: <b>Stewart Enterprises</b>                                                                                                                                                                                                                                                           |             |                                                                                        |                                             |                |  |                 |  |               |  |
| RR#, St. Address, Box # : <b>1202 S Washington</b> Board of Agriculture, Division of Water Resources                                                                                                                                                                                                     |             |                                                                                        |                                             |                |  |                 |  |               |  |
| City, State, ZIP Code : <b>Wichita, Kansas 67211</b> Application Number:                                                                                                                                                                                                                                 |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                     |             | 4 DEPTH OF COMPLETED WELL <b>32</b> ft. ELEVATION:                                     |                                             |                |  |                 |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Depth(s) Groundwater Encountered 1 <b>17.40</b> ft. 2 _____ ft. 3 _____ ft.            |                                             |                |  |                 |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | WELL'S STATIC WATER LEVEL <b>17.0</b> ft. below land surface measured on mo/day/yr     |                                             |                |  |                 |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm           |                                             |                |  |                 |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Est. Yield <b>NA</b> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm |                                             |                |  |                 |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Bore Hole Diameter _____ 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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)                                                                                                                                                                                                                     |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well <b>Air Sparge</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 _____                                                                                                                                                                                                               |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____                                                                                                                                                                                                                                       |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 7 Fiberglass _____ Threaded <b>X</b>                                                                                                                                                                                                                                                                     |             |                                                                                        |                                             |                |  |                 |  |               |  |
| Blank casing diameter <b>2.375</b> in. to <b>30.0</b> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.                                                                                                                                                                                          |             |                                                                                        |                                             |                |  |                 |  |               |  |
| Casing height above land surface <b>Flush Mount</b> in., weight _____ lbs./ft. Wall thickness or gauge No. <b>Schedule 40</b>                                                                                                                                                                            |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 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 <b>32.0</b> ft. to <b>30.0</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                         |             |                                                                                        |                                             |                |  |                 |  |               |  |
| From _____ ft. to _____ ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                  |             |                                                                                        |                                             |                |  |                 |  |               |  |
| GRAVEL PACK INTERVALS: From <b>32.0</b> ft. to <b>29.0</b> 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 <b>Sand</b>                                                                                                                                                                                                                           |             |                                                                                        |                                             |                |  |                 |  |               |  |
| Grout Intervals From _____ ft. to _____ ft. From <b>4.0</b> ft. to <b>29.0</b> ft. From <b>0.0</b> ft. to <b>4.0</b> 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 (former) 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? <b>NA</b> How many feet? <b>0</b>                                                                                                                                                                                                                                                   |             |                                                                                        |                                             |                |  |                 |  |               |  |
| LITHOLOGIC LOG                                                                                                                                                                                                                                                                                           |             |                                                                                        |                                             |                |  |                 |  |               |  |
| FROM                                                                                                                                                                                                                                                                                                     | TO          | CODE                                                                                   |                                             |                |  |                 |  |               |  |
| <b>0.0</b>                                                                                                                                                                                                                                                                                               | <b>1.0</b>  |                                                                                        | <b>Dark brown silty clay firm</b>           |                |  |                 |  |               |  |
| <b>1.0</b>                                                                                                                                                                                                                                                                                               | <b>3.0</b>  |                                                                                        | <b>Dark Brown silty clay, firm</b>          |                |  |                 |  |               |  |
| <b>3.0</b>                                                                                                                                                                                                                                                                                               | <b>8.0</b>  |                                                                                        | <b>Light brown clay firm</b>                |                |  |                 |  |               |  |
| <b>8.0</b>                                                                                                                                                                                                                                                                                               | <b>10.0</b> |                                                                                        | <b>Light brown clay, sandy firm</b>         |                |  |                 |  |               |  |
| <b>10.0</b>                                                                                                                                                                                                                                                                                              | <b>21.0</b> |                                                                                        | <b>Light Brown sand, fine grain</b>         |                |  |                 |  |               |  |
| <b>21.0</b>                                                                                                                                                                                                                                                                                              | <b>27.0</b> |                                                                                        | <b>Dark gray sand, fine-medium grain</b>    |                |  |                 |  |               |  |
| <b>27.0</b>                                                                                                                                                                                                                                                                                              | <b>32.0</b> |                                                                                        | <b>Light brown sand medium coarse grain</b> |                |  |                 |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             |                                                                                        | <b>Boring terminated @ 32.0</b>             |                |  |                 |  |               |  |
| <b>Flush-mount well completion waiver existent for site.</b>                                                                                                                                                                                                                                             |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 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) <b>3/20/08</b> and this record is true to the best of my knowledge and belief. Kansas                                         |             |                                                                                        |                                             |                |  |                 |  |               |  |
| Water Well Contractor's License No. <b>692</b> This Water Well Record was completed on (mo/day/yr) <b>3/20/08</b>                                                                                                                                                                                        |             |                                                                                        |                                             |                |  |                 |  |               |  |
| under the business name of <b>Quad State Services, Inc.</b> by (signature) _____                                                                                                                                                                                                                         |             |                                                                                        |                                             |                |  |                 |  |               |  |
| 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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