

|  |             |  |   |  |                 |              |
|--|-------------|--|---|--|-----------------|--------------|
| 1 LOCATION OF WATER WELL:  |             | Fraction   | Section Number                              |  | Township Number | Range Number |
| County: <b>Sedgwick</b>  |             | <b>NW</b> $\frac{1}{4}$ <b>SE</b> $\frac{1}{4}$ <b>NW</b> $\frac{1}{4}$                  | <b>28</b>                                   |  | <b>T 27 S</b>   | <b>R 1 E</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<br>1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>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 10 Other (specify) _____   |             |  |   |  |                 |              |
| 7 Torch cut  |             |  |   |  |                 |              |
| SCREEN-PERFORATED INTERVALS: From <b>32.0</b> ft. to <b>30.0</b> ft. From _____ ft. to _____ ft.   |             |  |   |  |                 |              |
| GRAVEL PACK INTERVALS: From <b>32.0</b> ft. to <b>29.0</b> 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>.40</b>  |  | <b>Asphalt</b>                              |  |                 |              |
| <b>.40</b>   | <b>2.0</b>  |  | <b>Dark Brown silty clay, firm</b>          |  |                 |              |
| <b>2.0</b>   | <b>8.0</b>  |  | <b>Dark Brown clay, firm</b>                |  |                 |              |
| <b>8.0</b>   | <b>17.0</b> |  | <b>Light Gray sand, fine grain, wet</b>     |  |                 |              |
| <b>17.0</b>  | <b>25.0</b> |  | <b>Light Brown sand, fine grain</b>         |  |                 |              |
| <b>25.0</b>  | <b>32.0</b> |  | <b>Light Brown sand medium coarse grain</b> |  |                 |              |
|  |             |  | <b>Boring terminated @ 32.0</b>             |  |                 |              |
| Flush-mount well completion waiver existent for site.  |             |  |   |  |                 |              |
| 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. |             |  |   |  |                 |              |

OFFICE USE ONLY

T

R

SEC