GSI Job No. 097110 **MW-2R**

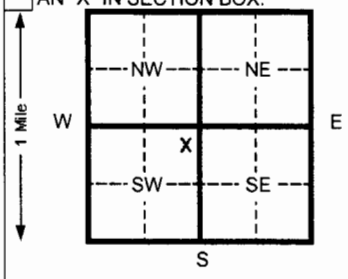
WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. **0043952**

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Sedgwick**	**NE** ¼ **NE** ¼ **SW** ¼	**26**	T **27** S	R **1** E

Distance and direction from nearest town or city street address of well if located within city?
55' N, 20' E of NE Corner of Garage – 3700 E. Lincoln, Wichita

2 WATER WELL OWNER: **Sisters of St. Joseph**
RR#, St. Address, Box # : **3700 E. Lincoln** Board of Agriculture, Division of Water Resources
City, State, ZIP Code : **Wichita, KS 67218** Application Number:

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL **15** ft. ELEVATION: **1343.80 (TOC)**
Depth(s) Groundwater Encountered 1 **13** ft. 2 ft. 3 ft.
WELL'S STATIC WATER LEVEL **8.78** ft. below TOC measured on mo/day/yr **07/14/09**
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 **8** in. to **15** 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
Was a chemical/bacteriological sample submitted to Department? Yes No **X** If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No **X**

5 TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass Threaded **Flush**
Blank casing diameter **2** in. to **5** ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface **Flush** in., weight **0.703** lbs./ft. Wall thickness or gauge No. **SCH. 40**
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From **5** ft. to **15** ft. From ft. to ft.
From ft. to ft. From ft. to ft.
GRAVEL PACK INTERVALS: From **4** ft. to **15** 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 **0.5** ft. to **4** 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? How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0.0	0.5		**Topsoil, dark brown**			
0.5	3.0	CL	**Lean Clay, brown**			
3.0	9.5	CL	**Sandy Clay, brown**			
9.5	15.0	CL-ML	**Silty Clay, dark gray brown to light brown**			

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) **07/28/09** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **531** This Water Well Record was completed on (mo/day/yr) **08/10/09** under the business name of **Geotechnical Services Inc.** 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