| WAT   | ER WE  | LL RECORD MW-15 Form WWC                                     | -5              | Division of Wate  | r Resources App. No       |                  |  |
|---|--|--|-----------------|---|---------------------------|------------------|--|
| 1 L(  | OCATION  | OF WATER WELL: Fraction                                      |                 | tion Number   | Township No.              | Range Number     |  |
|   | ounty: Se  |  | E 1/4           | 25  | T 27 S                    | R 1              |  |
|   |  | Address of Well Location; if unknown, distance & dire        | ction Glo       | bal Positioning   | System (GPS) int          | formation:       |  |
|   | from nearest town or intersection: If at owner's address, check here .   |  |                 | Global Positioning System (GPS) information: Latitude: 37.6642 (in decimal degrees) Longitude: 97.2717 (in decimal degrees) |                           |                  |  |
| 1   | QT store #329  |  |                 | Longitude: 11.4   |                           |                  |  |
|   | 5 <b>60</b> 2 E. Harry St, Wichita, KS                                   |  |                 | Datum: ☐ WGS 84, ☑ NAD 83, ☐ NAD 27   |                           |                  |  |
|   | Atlantic Richileta Company   |  |                 | Collection Method:  |                           |                  |  |
| RR#, Street Address, Box #: 501 Westlake Park Blvd  |  |  |                 | GPS unit (Make/Model: Garmin 60   |                           |                  |  |
| C   | ity, State,  | Houston, TX 77079  |                 |   |                           | Map, Land Survey |  |
| Est. Accuracy: □ <3 m, ☑ 3-5 m, □ 5-15 m, □ >15 m   |  |  |                 |   |                           |                  |  |
| 1   | ITH AN "X  | 4 DEPTH OF COMPLETED WELL                                    | 25              | ft.   |                           |                  |  |
| SE  | CTION BOX:   Depth(s) Groundwater Encountered (1)tt. (2)tt. (3)π.        |  |                 |   |                           |                  |  |
|   | WELL'S STATIC WATER LEVEL. 1.1. below land surface measured on mo/day/yr |  |                 |   |                           |                  |  |
|   | Pump test data: Well water was   |  |                 |   |                           |                  |  |
| EST. YIELDgpm. Well water wasft. after hours pumpinggpm   |  |  |                 |   |                           |                  |  |
| w E Bore Hole Diameter 8  |  |  |                 |   |                           |                  |  |
|   |  |  |                 |   |                           |                  |  |
| I Indication I Indication I Demontic form & condens of Manifestine well   |  |  |                 |   |                           |                  |  |
| Was a chemical/bacteriological sample submitted to Department?  Yes V No  |  |  |                 |   |                           |                  |  |
| S If yes, mo/day/yr sample was submitted.   |  |  |                 |   |                           |                  |  |
| 1 mile  Water well disinfected? ☐ Yes ☑ No  |  |  |                 |   |                           |                  |  |
| 5 TYPE OF CASING USED:  Steel  PVC Other  |  |  |                 |   |                           |                  |  |
| CASING JOINTS: Glued Clamped Welded Threaded  |  |  |                 |   |                           |                  |  |
| Casing diameter .2  |  |  |                 |   |                           |                  |  |
| Casing height above land surface. Flush in., Weight - lbs./ft., Wall thickness or gauge No. Sch. 40   |  |  |                 |   |                           |                  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  ☐ Steel ☐ Stainless Steel  |  |  |                 |   |                           |                  |  |
| ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)   |  |  |                 |   |                           |                  |  |
| SCREEN OR PERFORATION OPENINGS ARE:   |  |  |                 |   |                           |                  |  |
| ☐ Continuous slot ☑ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)  |  |  |                 |   |                           |                  |  |
| Louvered shutter  Key punched  Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From   |  |  |                 |   |                           |                  |  |
| From  |  |  |                 |   |                           |                  |  |
| GRAVEL PACK INTERVALS: From .25 ft. to .8 ft., From .7 ft. to .7 ft.  |  |  |                 |   |                           |                  |  |
| From  |  |  |                 |   |                           |                  |  |
| 6 GROUT MATERIAL: Neat cement Cement Bentonite Other  |  |  |                 |   |                           |                  |  |
| Grout Intervals: From .8  |  |  |                 |   |                           |                  |  |
| What is the nearest source of possible contamination:   |  |  |                 |   |                           |                  |  |
| ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☑ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well   |  |  |                 |   |                           |                  |  |
|   |  |  | tilizer storage | Oil well/ga   |                           | Station          |  |
|   |  |  | istance from v  | well  |                           |                  |  |
| FRON  | 1 TO   |  | OM TO           | LITHO. LO   | OG (cont.) <u>or</u> PLUC | GGING INTERVALS  |  |
| 0   | +!,-   | Asphut Carel   |                 | 1   |                           |                  |  |
|   | 16   | Silty clay I sand, Grown                                     |                 |   |                           |                  |  |
| 12  | 25   | Clay, It boan  |                 |   |                           |                  |  |
| ~   | 100  | Silty clay a/sand, Lt. brown                                 |                 |   |                           |                  |  |
|   |  |  |                 |   |                           |                  |  |
|   | _  |  |                 | +   |                           |                  |  |
|   |  |  |                 | 1   |                           |                  |  |
|   |  |  |                 |   |                           |                  |  |
|   |  |  |                 |   |                           |                  |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was   ☐ constructed, ☐ reconstructed, or ☐ plugged   |  |  |                 |   |                           |                  |  |
| under my jurisdiction and was completed on (mo/day/year) .1/27/.11 and this record is true to the best of my knowledge and belief.  |  |  |                 |   |                           |                  |  |
| Kansas Water Well Contractor's License No. 7.10 This Water Well Record was completed on (mo/day/year) 2/4/2011  |  |  |                 |   |                           |                  |  |
| under the business name of Below Ground Surface, Inc. by (signature)  INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies |  |  |                 |   |                           |                  |  |
|   |  | o Kansas Department of Health and Environment, Bureau of Wal |                 |   |                           |                  |  |
| Telepho   | ne 785-296-  | 5522. Send one copy to WATER WELL OWNER and retain of        |                 |   |                           |                  |  |
| http://www.kdheks.gov/waterwell/index.html.  KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy   |  |  |                 |   |                           |                  |  |
| KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy  |  |  |                 |   |                           |                  |  |