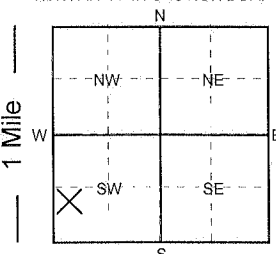


## WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: <b>Sedgwick</b>	FRACTION <b>NW 1/4 SW 1/4 SW 1/4</b>	SECTION NUMBER <b>10</b>	TOWNSHIP NUMBER <b>T 27 S</b>	RANGE NUMBER <b>R 1E E/W</b>																																																																																																																		
Distance and direction from nearest town or city street address of well if located within city? <b>1512 N. Kansas Wichita, Kansas</b>																																																																																																																						
2 WATER WELL OWNER: <b>MENONITE HOUSING</b> RR#, ST. ADDRESS, BOX #: <b>2145 N. Topeka</b> CITY, STATE: <b>Wichita, Kansas</b> ZIP CODE: <b>67214</b> Application Number: _____																																																																																																																						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: <b>40</b> ft. ELEVATION: _____ Depth of groundwater Encountered: _____ ft. WELL'S STATIC WATER LEVEL <b>13</b> FT. BELOW LAND SURFACE MEASURED ON <b>6/10/13</b> Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm Est. Yield: _____ gpm Well water was _____ ft. after _____ hours of pumping @ _____ gpm Bore Hole Diameter <b>12</b> in. to <b>40</b> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 1. Domestic 3. Feedlot 5. Public water supply <b>7. Lawn and garden only</b> 9. Dewatering 11. Injection well 2. Irrigation 4. Industrial 6. Oil field water supply 8. Air conditioning 10. Monitoring well 12. Other (Specify below) Was a chemical/bacteriological sample submitted to Department? <b>YES</b> <b>NO</b> ; If yes, what mo/day/yr was sample submitted Was Water Well Disinfected? <b>YES</b> <b>NO</b>																																																																																																																					
	5 TYPE OF CASING USED: 1. Steel 3. RPM (SR) 5. Wrought Iron 7. Fiberglass 9. Other (Specify below) CASING JOINTS: <b>Glued</b> Threaded <b>2. PVC</b> 4. ABS 6. Asbestos-Cement 8. Concrete tile <b>SDR26</b> Welded Clamped Blank casing diameter <b>5</b> in. to <b>25</b> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft. Casing height above land surface: <b>12</b> in., Weight: <b>2.35</b> lbs. / ft. Wall thickness or gauge No. <b>.214</b> TYPE OF SCREEN OR PERFORATION MATERIAL: 1. Steel 3. Stainless Steel 5. Fiberglass <b>7. PVC</b> 9. ABS 11. Other (specify) 2. Brass 4. Galvanized 6. Concrete Tile 8. RMP (SR) 10. Asbestos-Cement 12. None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1. Continuous slot 3. Mill slot 5. Gauzed wrapped 7. Torch cut 9. Drilled holes 11. None (open hole) 2. Louvered shutter 4. Key punched 6. Wire wrapped <b>8. Saw cut</b> 10. Other (specify) SCREEN - PERFORATION INTERVAL From <b>25</b> ft. to <b>40</b> ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <b>24</b> ft. to <b>40</b> ft., From _____ ft. to _____ ft.																																																																																																																					
6 GROUT MATERIALS: 1. Neat cement 2. Cement Grout 3. Bentonite Other <b>bentonite hole plug</b> Grout Intervals: From <b>4</b> ft. to <b>24</b> 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 13. Insecticide storage 15. Oil well/Gas well 2. Sewer lines 5. Cess Pool 8. Sewage lagoon 11. Fuel storage 14. Abandon water well 16. Other (specify below) <b>3. Watertight sewer line</b> 6. Seepage pit 9. Feed yard 12. Fertilizer storage Direction from well? <b>West</b> How many feet? <b>10 ft. plus</b>																																																																																																																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>From</th> <th>To</th> <th>LITHOLOGIC LOG</th> <th>From</th> <th>To</th> <th>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>3</td> <td>topsoil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>10</td> <td>clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>10</td> <td>15</td> <td>fine sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>30</td> <td>medium sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>30</td> <td>40</td> <td>gray shale</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					From	To	LITHOLOGIC LOG	From	To	LITHOLOGIC LOG	0	3	topsoil				3	10	clay				10	15	fine sand				15	30	medium sand				30	40	gray shale																																																																																	
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7 Contractor's or Landowner's Certification: This water well was 1. <b>constructed</b> 2. reconstructed or 3. plugged under my jurisdiction and was completed on (mo/day/year) <b>6/10/2013</b> and this record is to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This water well record was completed on (mo/day/year) <b>6/12/2013</b> under the business name of <b>Harp Well and Pump Service</b> by (signature) <b>Todd S. Harp</b>																																																																																																																						