

1 LOCATION OF WATER WELL: County: Sedgewick Fraction: SE 1/4 SE 1/4 SE 1/4 Section Number: 20 Township Number: T 27 S Range Number: R 1 EW

Distance and direction from nearest town or city street address of well if located within city? 220 East Kellogg, Wichita, KS

2 WATER WELL OWNER: Quik M. P. Corp. RR#, St. Address, Box #: 2510 West Lawrence City, State, ZIP Code: Wichita, KS Board of Agriculture, Division of Water Resources Application Number: MWZ

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing a 36-section grid with 'X' in the SE corner of the SW quadrant]

4 DEPTH OF COMPLETED WELL: 25' ft. ELEVATION: 18.01 ft. 18.0 ft. 18.02 ft. Depth(s) Groundwater Encountered: 1. 18.01 ft. 2. 18.0 ft. 3. 18.02 ft. WELL'S STATIC WATER LEVEL: 18.02 ft. below land surface measured on mo/day/yr 7/19/98

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: 6.75 in. to 25 ft. and _____ in. to _____ ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 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: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 Brass 4 Galvanized steel 6 Asbestos-Cement 9 Other (specify below) Welded _____ Threaded [X] 3 PVC 4 ABS 7 Fiberglass

Blank casing diameter _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height above land surface _____ in. weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 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 25 ft. to 10 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 25 ft. to 9 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 9 ft. to 1 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? Southwest How many feet? 15

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
6"	3-5'	Silty Clay			
3-5'	4'	Fine-Medium Sand			
4'	13'	Silty Clay			
13'	15'	Fine Sand			
15'	25'	Medium-Coarse Sand			

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/year) 7-16-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 634 This Water Well Record was completed on (mo/day/yr) 7-20-98 under the business name of Shirley E. Tosting by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send two copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.