

|                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------|--|----------------|--|---------------------------------------------------|--|--------------|--|
| 1) LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                      |  | Fraction                                                                                                        |  | Section Number |  | Township Number                                   |  | Range Number |  |
| County: Sedgewick                                                                                                                                                                                                                                                                                                                                               |  | NW 1/4 SW 1/4 NE 1/4                                                                                            |  | 28             |  | T 27 S                                            |  | R 1 E/W      |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                 |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 1002 South Washington Wichita, KS                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 2) WATER WELL OWNER: Lonnie Hephner                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                 |  |                |  | Tag #00094845                                     |  |              |  |
| RR#, St. Address, Box #: 2749 Laura                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                 |  |                |  | Board of Agriculture, Division of Water Resources |  |              |  |
| City, State, ZIP Code: Wichita, KS 67216                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                 |  |                |  | Application Number:                               |  |              |  |
| 3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                           |  | 4) DEPTH OF COMPLETED WELL: 20.1 ft. ELEVATION: 1,294.32                                                        |  |                |  |                                                   |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                 |  | Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.                                                           |  |                |  |                                                   |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                 |  | WELL'S STATIC WATER LEVEL 15.12 ft. below land surface measured on mo/day/yr 3/26/93                            |  |                |  |                                                   |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                 |  | 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 1/2 in. to 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 X                                           |  |                |  |                                                   |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                 |  | 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 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded                                                                                                                                                                                                                                                                                                    |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 7 Fiberglass Threaded X                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| Blank casing diameter 2 in. to B.O.H. ft., Dia in. to ft., Dia in. to ft.                                                                                                                                                                                                                                                                                       |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| Casing height above land surface -6 in., weight lbs./ft. Wall thickness or gauge No. Sch. 40                                                                                                                                                                                                                                                                    |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 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                                                                                                                                                                                                                                                                                                 |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 7 Torch cut 10 Other (specify)                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft., From ft. to ft.                                                                                                                                                                                                                                                                                             |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| From ft. to ft., From ft. to ft.                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| GRAVEL PACK INTERVALS: From 8 ft. to 20 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 ft. to ft., From 1 ft. to 8 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 17 UST leak                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| Direction from well? NW How many feet? 120                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS                                                                                                                                                                                                                                                                                                               |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 0 3 Clay topsoil                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 3 8 Silty clay                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 8 13 Fine Sand                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| 13 20 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) 3/24/93 and this record is true to the best of my knowledge and belief. Kansas                                                                                                    |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| Water Well Contractor's License No. 549 This Water Well Record was completed on (mo/day/yr) 8/2/93                                                                                                                                                                                                                                                              |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| under the business name of J & R Drilling Services, Inc. by (signature) Ray Coons                                                                                                                                                                                                                                                                               |  |                                                                                                                 |  |                |  |                                                   |  |              |  |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three 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. |  |                                                                                                                 |  |                |  |                                                   |  |              |  |