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

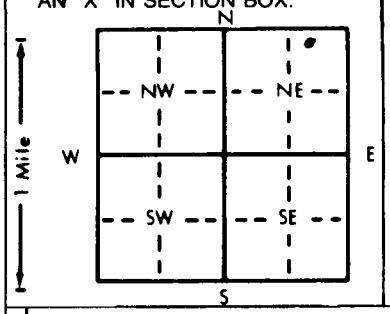
1 LOCATION OF WATER WELL: County: Sedgwick | Fraction: NW ¼ NW ¼ NE ¼ (NE) | Section Number: 14 | Township Number: T 27 S | Range Number: R 2E E/W

Distance and direction from nearest town or city street address of well if located within city?
14021 E. Northpoint Dr.

2 WATER WELL OWNER: Mike Murphy
RR#, St. Address, Box # : 14021 E. Northpoint Dr.
City, State, ZIP Code : Wichita, KS 67230

Board of Agriculture, Division of Water Resources Application Number:

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



4 DEPTH OF COMPLETED WELL 85' ft. ELEVATION: .....
Depth(s) Groundwater Encountered 1. ..... ft. 2. ..... ft. 3. ..... ft.
WELL'S STATIC WATER LEVEL 18 ft. below land surface measured on mo/day/yr 4/7/99
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 9 in. to 85 ft., and ..... in. to ..... ft.
WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply (7) Lawn and garden only 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below)
Was a chemical/bacteriological sample submitted to Department? Yes ..... No X ; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 1 Steel (2) PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
CASING JOINTS: Glued X Clamped ..... Welded ..... Threaded .....
Blank casing diameter 5 in. to 45 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface 12 in., weight ..... lbs./ft. Wall thickness or gauge No. SDR26
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile (7) PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) ..... 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter (3) Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole)
SCREEN-PERFORATED INTERVALS: From 45 ft. to 85 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 20 ft. to 85 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 4 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination:
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) .....
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	22	Clay			
22	36	Shale			
36	40	Lime			
40	75	Lime & Shale			
78	85	Cherty Lime			

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) 4/7/99 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. XXXX 171 This Water Well Record was completed on (mo/day/yr) 4/20/99 under the business name of G&S Drilling, Inc. 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 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.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼