

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                 |                   |                                                   |                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------|---------------------------------------------|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Fraction                                                                                        | Section Number    | Township Number                                   | Range Number                                |
| County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | <u>C 1/4 SW 1/4 NE 1/4</u>                                                                      | <u>27</u>         | T <u>27</u> S                                     | R <u>2E</u> E/W                             |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>12001 E. Laguna, Wichita</u>                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                 |                   |                                                   |                                             |
| 2 WATER WELL OWNER: <u>Kennedy Nesler</u>                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |                                                                                                 |                   |                                                   |                                             |
| RR#, St. Address, Box # : <u>12001 E. Laguna</u>                                                                                                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                 |                   | Board of Agriculture, Division of Water Resources |                                             |
| City, State, ZIP Code : <u>Wichita 67230</u>                                                                                                                                                                                                                                                                                                                                                                                                                               |    |                                                                                                 |                   | Application Number:                               |                                             |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                       |    | 4 DEPTH OF COMPLETED WELL <u>80</u> ft. ELEVATION:                                              |                   |                                                   |                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | Depth(s) Groundwater Encountered 1 <u>32</u> ft. 2 <u>4-16-03</u> ft.                           |                   |                                                   |                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | WELL'S STATIC WATER LEVEL <u>32</u> ft. below land surface measured on mo/day/yr <u>4-16-03</u> |                   |                                                   |                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm                    |                   |                                                   |                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm              |                   |                                                   |                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | 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 Domestic (lawn & garden) 10 Monitoring well                         |                   |                                                   |                                             |
| Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                                                                                              |    |                                                                                                 |                   |                                                   |                                             |
| Water Well Disinfected? Yes <u>X</u> No                                                                                                                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                 |                   |                                                   |                                             |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                               |    |                                                                                                 |                   |                                                   |                                             |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | 3 RMP (SR)                                                                                      | 5 Wrought iron    | 8 Concrete tile                                   | CASING JOINTS: Glued <u>X</u> Clamped _____ |
| 2 PVC                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    | 4 ABS                                                                                           | 6 Asbestos-Cement | 9 Other (specify below)                           | Welded _____                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                 | 7 Fiberglass      |                                                   | Threaded _____                              |
| Blank casing diameter <u>5</u> in. to <u>40</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                |    |                                                                                                 |                   |                                                   |                                             |
| Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No <u>SDR26</u>                                                                                                                                                                                                                                                                                                                                                              |    |                                                                                                 |                   |                                                   |                                             |
| 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) _____                          | ft.                                         |
| SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                              |    |                                                                                                 |                   |                                                   |                                             |
| GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                 |                   |                                                   |                                             |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____                                                                                                                                                                                                                                                                                                                                                                                                   |    |                                                                                                 |                   |                                                   |                                             |
| Grout Intervals: From <u>4</u> ft. to <u>20</u> 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)                    |
| Direction from well? _____ How many feet? _____                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                 |                   |                                                   |                                             |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | TO | LITHOLOGIC LOG                                                                                  | FROM              | TO                                                | PLUGGING INTERVALS                          |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 22 | shale                                                                                           |                   |                                                   |                                             |
| 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 39 | shale                                                                                           |                   |                                                   |                                             |
| 39                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 40 | lime                                                                                            |                   |                                                   |                                             |
| 40                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 75 | shale                                                                                           |                   |                                                   |                                             |
| 75                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 80 | lime (cherty)                                                                                   |                   |                                                   |                                             |
| 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) <u>4-16-03</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>171</u> This Water Well Record was completed on (mo/day/yr) <u>4-22-03</u> under the business name of <u>G+S Drilling Inc.</u> by (signature) <u>[Signature]</u> |    |                                                                                                 |                   |                                                   |                                             |
| 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.                   |    |                                                                                                 |                   |                                                   |                                             |