

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

|                                                                                                                                                                                                                                                                                                          |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------|----|-------------------------------|--|---------------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                |            | Fraction                                                                           |                                                                                                                                | Section Number |    | Township Number               |  | Range Number        |  |
| County: <b>Sedgwick</b>                                                                                                                                                                                                                                                                                  |            | <b>SW ¼ SW ¼ SW ¼</b>                                                              |                                                                                                                                | <b>21</b>      |    | T <b>27</b> S                 |  | R <b>2</b> <b>E</b> |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>Northeast corner of Kellogg and Webb – Wichita</b>                                                                                                                                                 |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 2 WATER WELL OWNER: <b>Hawker Beechcraft</b>                                                                                                                                                                                                                                                             |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| RR#, St. Address, Box # : <b>101 S. Webb Rd.</b> Board of Agriculture, Division of Water Resources                                                                                                                                                                                                       |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| City, State, ZIP Code : <b>Wichita, KS 67207</b> Application Number:                                                                                                                                                                                                                                     |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                     |            | 4 DEPTH OF COMPLETED WELL <b>39</b> ft. ELEVATION:                                 |                                                                                                                                |                |    |                               |  |                     |  |
|                                                                                                                                                                                                                                                                                                          |            | Depth(s) Groundwater Encountered 1 <b>34</b> ft. 2 <b>34.5</b> ft. 3 _____ ft.     |                                                                                                                                |                |    |                               |  |                     |  |
|                                                                                                                                                                                                                                                                                                          |            | WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr       |                                                                                                                                |                |    |                               |  |                     |  |
|                                                                                                                                                                                                                                                                                                          |            | 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 <b>8.25</b> in. to <b>39</b> ft. and _____ in. to _____ ft.     |                                                                                                                                |                |    |                               |  |                     |  |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well                                                                                                                                                                                                                     |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)                                                                                                                                                                                                                     |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) <b>10 Monitoring well</b>                                                                                                                                                                                                                         |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted                                                                                                                                                                              |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| Water Well Disinfected? Yes _____ No <b>X</b>                                                                                                                                                                                                                                                            |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                             |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____                                                                                                                                                                                                               |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 2 <b>PVC</b> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____                                                                                                                                                                                                                                |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 7 Fiberglass _____ Threaded <b>Flush</b>                                                                                                                                                                                                                                                                 |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| Blank casing diameter <b>2</b> in. to <b>29</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.                                                                                                                                                                                              |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| Casing height above land surface <b>0</b> in., weight <b>0.703</b> lbs./ft. Wall thickness or gauge No. <b>SCH. 40</b>                                                                                                                                                                                   |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                  |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____                                                                                                                                                                                                                               |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)                                                                                                                                                                                                                                |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                      |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 1 Continuous slot 3 <b>Mill slot</b> 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 <b>29</b> ft. to <b>39</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                             |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| GRAVEL PACK INTERVALS: From <b>27</b> ft. to <b>39</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                   |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <b>3 Bentonite</b> 4 Other _____                                                                                                                                                                                                                          |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| Grout Intervals From <b>1</b> ft. to <b>27</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 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? _____ How many feet? _____                                                                                                                                                                                                                                                          |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| FROM                                                                                                                                                                                                                                                                                                     | TO         | CODE                                                                               | LITHOLOGIC LOG                                                                                                                 | FROM           | TO | PLUGGING INTERVALS            |  |                     |  |
| <b>0</b>                                                                                                                                                                                                                                                                                                 | <b>0.5</b> |                                                                                    | <b>Asphalt</b>                                                                                                                 |                |    |                               |  |                     |  |
| <b>0.5</b>                                                                                                                                                                                                                                                                                               | <b>4</b>   |                                                                                    | <b>Clay, with sand, dark brown, sand increasing at 2.5'</b>                                                                    |                |    |                               |  |                     |  |
| <b>4</b>                                                                                                                                                                                                                                                                                                 | <b>26</b>  |                                                                                    | <b>Marly Clay, olive, light brown, orange-brown mottled, with gypsum seams, iron staining below 14', sandstone seam at 22'</b> |                |    |                               |  |                     |  |
| <b>26</b>                                                                                                                                                                                                                                                                                                | <b>39</b>  |                                                                                    | <b>Shale, weathered, light brown, light gray, with sand seams</b>                                                              |                |    |                               |  |                     |  |
|                                                                                                                                                                                                                                                                                                          |            |                                                                                    |                                                                                                                                |                |    | <b>GPS:</b>                   |  |                     |  |
|                                                                                                                                                                                                                                                                                                          |            |                                                                                    |                                                                                                                                |                |    | <b>Latitude: N 37.679494</b>  |  |                     |  |
|                                                                                                                                                                                                                                                                                                          |            |                                                                                    |                                                                                                                                |                |    | <b>Longitude: W 97.224342</b> |  |                     |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1) constructed</b> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) <b>09/24/13</b> and this record is true to the best of my knowledge and belief. Kansas                                |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| Water Well Contractor's License No. <b>531</b> This Water Well Record was completed on (mo/day/yr) <b>10/18/13</b>                                                                                                                                                                                       |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| under the business name of <b>GSI Engineering, LLC</b> by (signature) <i>Charles B...</i>                                                                                                                                                                                                                |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records. |            |                                                                                    |                                                                                                                                |                |    |                               |  |                     |  |

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