

| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | LOCATION OF WATER WELL:<br>County: <u>Sedgwick</u> Fraction <u>SW 1/4 NE 1/4</u>                                                             | Section Number<br><u>16</u> | Township Number<br><u>28S</u> | Range Number<br><u>1E</u> |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
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| Distance and direction from nearest town or city street address of well if located within city?<br><u>1639 Alta</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                              |                             |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | WATER WELL OWNER: <u>Leveda Holmes</u><br>RR#, St. Address, Box #: <u>10300 W Central</u><br>City, State, ZIP Code: <u>Wichita, KS 67212</u> |                             |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                              | 4                           |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br>N<br><table border="1" style="width:100%; height: 100px; text-align: center; border-collapse: collapse;"><tr><td colspan="2">N W</td><td colspan="2">N E</td></tr><tr><td>W</td><td></td><td></td><td>E</td></tr><tr><td colspan="2">S W</td><td colspan="2">S E</td></tr></table><br>S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                              | N W                         |                               | N E                       |               | W             |                    |                          | E                       | S W           |                       | S E               |                          | DEPTH OF WELL <u>26</u> ft.<br>WELL'S STATIC WATER LEVEL <u>13</u> ft.<br><br>WELL WAS USED AS:<br><table style="width:100%;"><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden Only</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other <u>Windmill</u></td></tr></table><br>Was a chemical/bacteriological sample submitted to Department? Yes....No...<br>If yes, mo/day/yr sample was submitted.....<br>Water Well Disinfected: Yes... <u>X</u> No..... |                        |                     | 1 Domestic      | 5 Public Water Supply | 9 Dewatering            | 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well | 3 Feedlot            | 7 Lawn and Garden Only | 11 Injection Well | 4 Industrial | 8 Air Conditioning | 12 Other <u>Windmill</u> |
| N W                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                              | N E                         |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| W                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                              |                             | E                             |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| S W                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                              | S E                         |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 1 Domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 5 Public Water Supply                                                                                                                        | 9 Dewatering                |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 2 Irrigation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 6 Oil Field Water Supply                                                                                                                     | 10 Monitoring Well          |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 3 Feedlot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7 Lawn and Garden Only                                                                                                                       | 11 Injection Well           |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 4 Industrial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 8 Air Conditioning                                                                                                                           | 12 Other <u>Windmill</u>    |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 5 TYPE OF BLANK CASING USED:<br><table style="width:100%;"><tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (specify below)</td></tr><tr><td>2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr></table><br>Blank casing diameter <u>5</u> in. Was casing pulled? Yes..... No... <u>X</u> If yes, how much.....<br>Casing height above or below land surface.....in.                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                              |                             |                               |                           | 1 Steel       | 3 RMP (SR)    | 5 Wrought          | 7 Fiberglass             | 9 Other (specify below) | 2 PVC         | 4 ABS                 | 6 Asbestos-Cement | 8 Concrete Tile          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 3 RMP (SR)                                                                                                                                   | 5 Wrought                   | 7 Fiberglass                  | 9 Other (specify below)   |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 2 PVC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 4 ABS                                                                                                                                        | 6 Asbestos-Cement           | 8 Concrete Tile               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....<br>Grout Plug Intervals: From <u>13</u> ft. to <u>0</u> ft., From <u>0</u> ft. to <u>0</u> ft., From <u>0</u> ft. to <u>0</u> ft.<br>What is the nearest source of possible contamination:<br><table style="width:100%;"><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below)</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td></td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr></table><br>Direction from well? <u>east</u> How many feet? <u>30</u> |                                                                                                                                              |                             |                               |                           | 1 Septic tank | 6 Seepage pit | 11 Fuel storage    | 16 Other (specify below) | 2 Sewer lines           | 7 Pit privy   | 12 Fertilizer storage |                   | 3 Watertight sewer lines | 8 Sewage lagoon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13 Insecticide storage |                     | 4 Lateral lines | 9 Feedyard            | 14 Abandoned water well |              | 5 Cess Pool              | 10 Livestock pens  | 15 Oil well/Gas well |                        |                   |              |                    |                          |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 6 Seepage pit                                                                                                                                | 11 Fuel storage             | 16 Other (specify below)      |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 7 Pit privy                                                                                                                                  | 12 Fertilizer storage       |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 3 Watertight sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8 Sewage lagoon                                                                                                                              | 13 Insecticide storage      |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 4 Lateral lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 9 Feedyard                                                                                                                                   | 14 Abandoned water well     |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 5 Cess Pool                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 10 Livestock pens                                                                                                                            | 15 Oil well/Gas well        |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>26</u></td> <td><u>13</u></td> <td><u>gravel</u></td> </tr> <tr> <td><u>13</u></td> <td><u>0</u></td> <td><u>Cement</u></td> </tr> <tr> <td><u>1</u></td> <td><u>0</u></td> <td><u>pitcher pump</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>                                                                                                                                                                                                                                                                                               |                                                                                                                                              |                             |                               |                           | FROM          | TO            | PLUGGING MATERIALS | <u>26</u>                | <u>13</u>               | <u>gravel</u> | <u>13</u>             | <u>0</u>          | <u>Cement</u>            | <u>1</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <u>0</u>               | <u>pitcher pump</u> |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TO                                                                                                                                           | PLUGGING MATERIALS          |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| <u>26</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <u>13</u>                                                                                                                                    | <u>gravel</u>               |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| <u>13</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <u>0</u>                                                                                                                                     | <u>Cement</u>               |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| <u>1</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>0</u>                                                                                                                                     | <u>pitcher pump</u>         |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                              |                             |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                              |                             |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                              |                             |                               |                           |               |               |                    |                          |                         |               |                       |                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                     |                 |                       |                         |              |                          |                    |                      |                        |                   |              |                    |                          |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>11-24-97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>38</u> This Water Well Record was completed on (mo/day/year) <u>11-25-97</u> under the business name of <u>Weninger Drilling Inc.</u><br>by (signature) <u>Michelle Becker</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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.