1501 RW-87

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

1 LOCATION OF WATER WELL:

County:	Fraction	Section Number	Township Number	Range Number
Sedgwick	SW ¼ SW ¼ NE ¼	14	T 28 S	R 1 EW

Distance and direction from nearest town or city street address of well if located within city?
Approximately 1/8 mile south and 1/8 mile east of Wichita

2 WATER WELL OWNER: Boeing Company
RR#, St. Address, Box # : 3801 S. Oliver
City, State, ZIP Code : Wichita, KS 67210

Board of Agriculture, Division of Water Resources
Application Number: N/A

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

N
NW | NE
x
W | E
SW | SE
S
1 Mile

4 DEPTH OF COMPLETED WELL 45.5 ft. ELEVATION: unknown

Depth(s) Groundwater Encountered 1. ..... ft. 2. ..... ft. 3. ..... ft.

WELL'S STATIC WATER LEVEL 24.6 ft. below land surface measured on mo/day/yr 11-9-92

Pump test data: Well water was not ch'd ft. after ..... hours pumping ..... gpm

Est. Yield unknown gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter 11 in. to 45.5 ft., and ..... in. to ..... ft.

WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Monitoring well Recovery 11 Injection well 12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes ..... No x ; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No x

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

CASING JOINTS: Glued x Clamped ..... Welded ..... Threaded .....

Blank casing diameter 5 in. to 18 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 24 in., weight 2.87 lbs./ft. Wall thickness or gauge No. .265

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) ..... 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From 18 ft. to 43.5 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 16 ft. to 45 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug

Grout Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From 0 ft. to 16 ft.

What is the nearest source of possible contamination:
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) Ground already contaminated

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Topsoil			
1	4	Clay, red, silty			
4	9	Clay, red, brown, silty			
9	11	Clay, brown, small stringers of sand			
11	15	Clay, tan, small stringers of sand			
15	20	Clay, tan, small stringers of sand			
20	20.5	Clay, tan, soft			
20.5	25	Clay, tan, soft			
25	34	Clay, tan, soft			
34	35.5	Sand			
35.5	42.5	Clay, green, little reddish at 41'			
42.5	45.5	Shale, gray			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7-28-92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/yr) 2-25-93 under the business name of Clarke Well & Equipment, Inc. by (signature) [signature]

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.