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

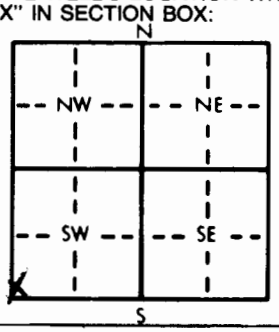
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	SW ¼ SW ¼ SW ¼	17	T 28 S	R 1E (E/W)

Distance and direction from nearest town or city street address of well if located within city?
4718 N. Seneca Wichita, Ks.

2 WATER WELL OWNER: Gary Lofstead
RR#, St. Address, Box # : 4718 N. Seneca
City, State, ZIP Code : Wichita, Ks.

Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF COMPLETED WELL....40..... ft. ELEVATION: .....
Depth(s) Groundwater Encountered 1....17.....ft. 2.....ft. 3.....ft.
WELL'S STATIC WATER LEVEL ...17..... ft. below land surface measured on mo/day/yr ..8-23-88.....
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...11.....in. to .....ft., and.....in. to .....ft.
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well .....
Was a chemical/bacteriological sample submitted to Department? Yes.....No....X.....; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..X... Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....
2 PVC 4 ABS 7 Fiberglass Cer-Mac.styrene.SDR-26 Threaded.....
Blank casing diameter ....5.....in. to .....30..... ft., Dia .....in. to .....ft., Dia .....in. to .....ft.
Casing height above land surface.....12.....in., weight .....1.59..... lbs./ft. Wall thickness or gauge No. ....203.....
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....
SCREEN-PERFORATED INTERVALS: From....30..... ft. to ..40..... ft., From ..... ft. to..... ft.
From..... ft. to ..... ft., From ..... ft. to..... ft.
GRAVEL PACK INTERVALS: From....24..... ft. to ..40..... ft., From ..... ft. to..... ft.
From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....
Grout Intervals: From.....4....ft. to ..24..... ft., From ..... ft. to..... ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage .....
Direction from well? East How many feet? 65

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil			
3	12	Clay			
12	26	Fine Sand			
26	40	Medium Sand			

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) .....8-23-88..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .....236..... This Water Well Record was completed on (mo/day/yr) ....4-24-89.....
under the business name of Harp Well and Pump Service, Inc. by (signature) Mary Arnold

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼