

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           |                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------|------------------------------------------------------------------------|
| <b>1 LOCATION OF WATER WELL:</b><br>County: <u>Sedgewick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           | Fraction<br><u>NE 1/4 NE 1/4 SE 1/4</u>                                                                                                                                                                                                                                                                         | Section Number<br><u>6</u>                                                           | Township Number<br><u>T 28 S</u> | Range Number<br><u>R 1 E</u>                                           |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>1201 W 27th St</u>                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
| <b>2 WATER WELL OWNER:</b><br>RR#, St. Address, Box # : <u>Marvin Rasmussen</u><br>City, State, ZIP Code : <u>Wichita Kan 67217</u>                                                                                                                                                                                                                                                                                                                                                                                                                               |           |                                                                                                                                                                                                                                                                                                                 | Board of Agriculture, Division of Water Resources<br>Application Number: <u>none</u> |                                  |                                                                        |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           | <b>4 DEPTH OF COMPLETED WELL:</b>                                                                                                                                                                                                                                                                               |                                                                                      |                                  |                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           | Depth(s) Groundwater Encountered <u>14</u> ft.                                                                                                                                                                                                                                                                  |                                                                                      |                                  |                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           | ELEVATION: <u>1300</u> ft.                                                                                                                                                                                                                                                                                      |                                                                                      |                                  |                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           | WELL'S STATIC WATER LEVEL <u>14</u> ft. below land surface measured on mo/day/yr <u>2-15-89</u>                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           | 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 <u>9</u> in. to <u>14</u> in., and _____ in. to _____ ft.                                                                                                                                                                                                                                    |                                                                                      |                                  |                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           | WELL WATER TO BE USED AS:<br>1 Domestic    3 Feedlot    5 Public water supply    8 Air conditioning    11 Injection well<br>2 Irrigation    4 Industrial    6 Oil field water supply    9 Dewatering    12 Other (Specify below)<br><input checked="" type="radio"/> Lawn and garden only    10 Monitoring well |                                                                                      |                                  |                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____                                                                                                                                                    |                                                                                      |                                  |                                                                        |
| <b>5 TYPE OF BLANK CASING USED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           | Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>                                                                                                                                                                                                                                        |                                                                                      |                                  |                                                                        |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | 3 RMP (SR)                                                                                                                                                                                                                                                                                                      | 5 Wrought iron                                                                       | 8 Concrete tile                  | CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ |
| 2 PVC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           | 4 ABS                                                                                                                                                                                                                                                                                                           | 6 Asbestos-Cement                                                                    | 9 Other (specify below)          | Welded _____                                                           |
| Blank casing diameter <u>5.56</u> in. to <u>31</u> in.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           | 7 Fiberglass                                                                                                                                                                                                                                                                                                    | Threaded _____                                                                       |                                  |                                                                        |
| Casing height above land surface <u>12</u> in., weight _____ lbs./ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           | Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                      | Dia _____ in. to _____ ft.                                                           |                                  |                                                                        |
| <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           | lbs./ft. Wall thickness or gauge No. <u>SDR26</u>                                                                                                                                                                                                                                                               |                                                                                      |                                  |                                                                        |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | 3 Stainless steel                                                                                                                                                                                                                                                                                               | 5 Fiberglass                                                                         | 7 PVC                            | 10 Asbestos-cement                                                     |
| 2 Brass                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | 4 Galvanized steel                                                                                                                                                                                                                                                                                              | 6 Concrete tile                                                                      | 8 RMP (SR)                       | 11 Other (specify) _____                                               |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           | 9 ABS                                                                                                                                                                                                                                                                                                           |                                                                                      |                                  |                                                                        |
| 1 Continuous slot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           | 3 Mill slot                                                                                                                                                                                                                                                                                                     | 5 Gauzed wrapped                                                                     | 8 Saw cut                        | 11 None (open hole)                                                    |
| 2 Louvered shutter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           | 4 Key punched                                                                                                                                                                                                                                                                                                   | 6 Wire wrapped                                                                       | 9 Drilled holes                  |                                                                        |
| SCREEN-PERFORATED INTERVALS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           | 7 Torch cut                                                                                                                                                                                                                                                                                                     |                                                                                      |                                  |                                                                        |
| From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           | 10 Other (specify) _____                                                                                                                                                                                                                                                                                        |                                                                                      |                                  |                                                                        |
| GRAVEL PACK INTERVALS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           |                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
| From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           |                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
| <u>none</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           |                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
| <b>6 GROUT MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
| Grout Intervals: 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                                                   |
| <input checked="" type="radio"/> Watertight sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | 6 Seepage pit                                                                                                                                                                                                                                                                                                   | 9 Feedyard                                                                           | 12 Fertilizer storage            | 16 Other (specify below)                                               |
| Direction from well? <u>East</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           | How many feet? <u>30</u>                                                                                                                                                                                                                                                                                        |                                                                                      |                                  |                                                                        |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | TO        | LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                  | FROM                                                                                 | TO                               | PLUGGING INTERVALS                                                     |
| <u>0</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <u>6</u>  | <u>Top Soil</u>                                                                                                                                                                                                                                                                                                 |                                                                                      |                                  |                                                                        |
| <u>6</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <u>14</u> | <u>Fine Tan Sand</u>                                                                                                                                                                                                                                                                                            |                                                                                      |                                  |                                                                        |
| <u>14</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <u>41</u> | <u>Coarse Tan Sand</u>                                                                                                                                                                                                                                                                                          |                                                                                      |                                  |                                                                        |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="radio"/> constructed, <input type="radio"/> reconstructed, or <input type="radio"/> plugged under my jurisdiction and was completed on (mo/day/year) <u>2-15-89</u> and this record is true to the best of my knowledge and belief, Kansas Water Well Contractor's License No. <u>472</u> This Water Well Record was completed on (mo/day/yr) <u>2-15-89</u> under the business name of <u>Bearden Pump &amp; Well Ser</u> by (signature) <u>David R. Bearden</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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.