

|   |                         |                             |          |        |           |        |          |           |
|---|-------------------------|-----------------------------|----------|--------|-----------|--------|----------|-----------|
| 1 | LOCATION OF WATER WELL: | Fraction                    | Section  | Number | Township  | Number | Range    | Number    |
|   | County: <u>Sedgwick</u> | <u>NE 1/4 NE 1/4 NE 1/4</u> | <u>7</u> |        | <u>28</u> |        | <u>1</u> | <u>EW</u> |

Distance and direction from nearest town or city street address of well if located within city?

3201 S. Seneca Wichita KS 67217

|   |                                                 |                                                   |
|---|-------------------------------------------------|---------------------------------------------------|
| 2 | WATER WELL OWNER: <u>Amoco 5460</u>             | Board of Agriculture, Division of Water Resources |
|   | RR #, St. Address, Box #: <u>3201 S. Seneca</u> | Application Number:                               |
|   | City, State, ZIP Code: <u>Wichita KS 67217</u>  |                                                   |

|              |                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------|--------------|--------------|--------------------------|--------------------|-----------|----------------------------|--------------------------|--------------|--------------------|----------------|--|--|
| 3            | MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                            | 4                        | DEPTH OF WELL <u>30</u> ft. |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
|              | WELL'S STATIC WATER LEVEL <u>13.3</u> ft.                                                                                                                                                                                                                                                                                                                                                                   |                          |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
|              | WELL WAS USED AS:                                                                                                                                                                                                                                                                                                                                                                                           |                          |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
|              | <table border="0"> <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 Domestic (Lawn &amp; Garden)</td> <td><u>11 Injection Well</u></td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other .....</td> </tr> </table> | 1 Domestic               | 5 Public Water Supply       | 9 Dewatering | 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well | 3 Feedlot | 7 Domestic (Lawn & Garden) | <u>11 Injection Well</u> | 4 Industrial | 8 Air Conditioning | 12 Other ..... |  |  |
| 1 Domestic   | 5 Public Water Supply                                                                                                                                                                                                                                                                                                                                                                                       | 9 Dewatering             |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
| 2 Irrigation | 6 Oil Field Water Supply                                                                                                                                                                                                                                                                                                                                                                                    | 10 Monitoring Well       |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
| 3 Feedlot    | 7 Domestic (Lawn & Garden)                                                                                                                                                                                                                                                                                                                                                                                  | <u>11 Injection Well</u> |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
| 4 Industrial | 8 Air Conditioning                                                                                                                                                                                                                                                                                                                                                                                          | 12 Other .....           |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
|              | Was a chemical / bacteriological sample submitted to Department? Yes ..... No <u>X</u> .....                                                                                                                                                                                                                                                                                                                |                          |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
|              | If yes, mo/day/yr sample was submitted .....                                                                                                                                                                                                                                                                                                                                                                |                          |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |
|              | Water Well Disinfected: Yes ..... No <u>X</u> .....                                                                                                                                                                                                                                                                                                                                                         |                          |                             |              |              |                          |                    |           |                            |                          |              |                    |                |  |  |

|              |                                                                                                                                                                                                                                                                     |                   |                 |                         |              |                         |              |       |                   |                 |  |
|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------|-------------------------|--------------|-------------------------|--------------|-------|-------------------|-----------------|--|
| 5            | TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                          |                   |                 |                         |              |                         |              |       |                   |                 |  |
|              | <table border="0"> <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><u>2 PVC</u></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> | 1 Steel           | 3 RMP (SR)      | 5 Wrought               | 7 Fiberglass | 9 Other (Specify below) | <u>2 PVC</u> | 4 ABS | 6 Asbestos-Cement | 8 Concrete Tile |  |
| 1 Steel      | 3 RMP (SR)                                                                                                                                                                                                                                                          | 5 Wrought         | 7 Fiberglass    | 9 Other (Specify below) |              |                         |              |       |                   |                 |  |
| <u>2 PVC</u> | 4 ABS                                                                                                                                                                                                                                                               | 6 Asbestos-Cement | 8 Concrete Tile |                         |              |                         |              |       |                   |                 |  |
|              | Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No ..... If yes, how much <u>3'</u>                                                                                                                                                              |                   |                 |                         |              |                         |              |       |                   |                 |  |
|              | Casing height above or below land surface ..... in.                                                                                                                                                                                                                 |                   |                 |                         |              |                         |              |       |                   |                 |  |

|                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |                              |                             |                          |               |             |                       |  |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |  |  |  |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------|-----------------------------|--------------------------|---------------|-------------|-----------------------|--|--------------------------|-----------------|------------------------|--|-----------------|------------|-------------------------|--|-------------|-------------------|----------------------|--|--|--|--|
| 6                        | GROUT PLUG MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1 Neat cement                       | 2 Cement grout               | <u>3 Bentonite</u>          | 4 Other .....            |               |             |                       |  |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |  |  |  |
|                          | Grout Plug Intervals:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | From <u>30</u> ft. to <u>3</u> ft., | From ..... ft. to ..... ft., | From ..... ft. to ..... ft. |                          |               |             |                       |  |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |  |  |  |
|                          | What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                              |                             |                          |               |             |                       |  |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |  |  |  |
|                          | <table border="0"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td><u>11 Fuel storage</u></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> | 1 Septic tank                       | 6 Seepage pit                | <u>11 Fuel storage</u>      | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>11 Fuel storage</u>              | 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                |                              |                             |                          |               |             |                       |  |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |  |  |  |
|                          | Direction from well? <u>SE</u> How many feet? <u>50</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                              |                             |                          |               |             |                       |  |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |  |  |  |

| FROM       | TO        | PLUGGING MATERIALS     |
|------------|-----------|------------------------|
| <u>30'</u> | <u>3'</u> | <u>Bentonite chips</u> |
| <u>3'</u>  | <u>0'</u> | <u>Native material</u> |
|            |           |                        |
|            |           |                        |
|            |           |                        |
|            |           |                        |
|            |           |                        |
|            |           |                        |

|   |                                                                                                                                                                                                                                                                                                                                                                                                       |
|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7 | CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>5-7-07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>6-21-07</u> This Water Well Record was completed on (mo/day/year) <u>6-21-07</u> under the business name of <u>Greenfield Contractors</u> |
|   | by (signature) <u>Joan Pearson</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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.