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| 1 LOCATION OF WATER WELL:<br><b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | FRACTION<br><b>SW 1/4 SE 1/4 SW 1/4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | SECTION NUMBER<br><b>18</b> | TOWNSHIP NUMBER<br><b>T 29 S</b> | RANGE NUMBER<br><b>R 1E E/W</b> |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>9457 S. Stearns Haysville, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                             |                                  |                                 |
| 2 WATER WELL OWNER:<br>RR#,ST. ADDRESS,BOX #:<br>CITY, STATE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | <b>K &amp; M CONSTRUCTION</b><br><b>P.O. Box 423</b><br><b>Haysville, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                             |                                  |                                 |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 4 DEPTH OF COMPLETED WELL: <b>62</b> ft. ELEVATION:<br>Depth of groundwater Encountered: ft. ft. ft.<br>WELL'S STATIC WATER LEVEL <b>30</b> FT. BELOW LAND SURFACE MEASURED ON <b>3/1/07</b><br>Pump test data: Well water was ft. after hours of pumping @ gpm<br>Est. Yield: gpm Well water was ft. after hours of pumping @ gpm<br>Bore Hole Diameter <b>12</b> in. to <b>62</b> ft. and in. to ft.<br>WELL WATER TO BE USED AS:<br><input checked="" type="checkbox"/> 1. Domestic <input type="checkbox"/> 3. Feedlot <input type="checkbox"/> 5. Public water supply <input type="checkbox"/> 7. Lawn and garden only <input type="checkbox"/> 9. Dewatering <input type="checkbox"/> 11. Injection well<br><input type="checkbox"/> 2. Irrigation <input type="checkbox"/> 4. Industrial <input type="checkbox"/> 6. Oil field water supply <input type="checkbox"/> 8. Air conditioning <input type="checkbox"/> 10. Monitoring well <input type="checkbox"/> 12. Other (Specify below)<br>Was a chemical/bacteriological sample submitted to Department? <b>YES</b> <input checked="" type="checkbox"/> <b>NO</b> ; If yes, what mo/day/yr was sample submitted <b>YES</b> <input checked="" type="checkbox"/> <b>NO</b><br>Was Water Well Disinfected? <b>YES</b> <input checked="" type="checkbox"/> <b>NO</b> |  |                             |                                  |                                 |
| 5 TYPE OF CASING USED:<br>1. Steel 3. RPM (SR) 5. Wrought Iron 7. Fiberglass 9. Other (Specify below) CASING JOINTS: <input checked="" type="checkbox"/> Glued Threaded<br><input checked="" type="checkbox"/> 2. PVC <input type="checkbox"/> 4. ABS 6. Asbestos-Cement 8. Concrete tile SDR-26 <input type="checkbox"/> Welded Clamped<br>Blank casing diameter <b>5</b> in. to <b>42</b> ft., Dia. in. to ft., Dia. in. to ft.<br>Casing height above land surface: <b>12</b> in., Weight: <b>2.35</b> lbs. / ft. Wall thickness or gauge No. <b>.214</b><br>TYPE OF SCREEN OR PERFORATION MATERIAL:<br>1. Steel 3. Stainless Steel 5. Fiberglass <input checked="" type="checkbox"/> 7. PVC 9. ABS 11. Other (specify)<br>2. Brass 4. Galvanized 6. Concrete Tile 8. RMP (SR) 10. Asbestos-Cement 12. None used (open hole)<br>SCREEN OR PERFORATION OPENINGS ARE:<br>1. Continuous slot 3. Mill slot 5. Gauzed wrapped 7. Torch cut 9. Drilled holes 11. None ( open hole)<br>2. Louvered shutter 4. Key punched 6. Wire wrapped <input checked="" type="checkbox"/> 8. Saw cut 10. Other (specify)<br>SCREEN - PERFORATION INTERVAL From <b>42</b> ft. to <b>62</b> ft., From ft. to ft.<br>GRAVEL PACK INTERVALS: From <b>24</b> ft. to <b>62</b> ft., From ft. to ft.<br>From ft. to ft., From ft. to ft. |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                             |                                  |                                 |
| 6 GROUT MATERIALS: 1. Neat cement 2. Cement Grout 3. Bentonite Other bentonite hole plug<br>Grout Intervals: From <b>4</b> ft. to <b>24</b> ft., From ft. to ft., From ft. to ft.<br>What is the nearest source of possible contamination:<br>1. Septic tank 4. Lateral lines 7. Pit privy 10. Livestock pens 13. Insecticide storage 15. Oil well/Gas well<br>2. Sewer lines 5. Cess Pool 8. Sewage lagoon 11. Fuel storage 14. Abandon water well 16. Other (specify below)<br><input checked="" type="checkbox"/> 3. Watertight sewer line 6. Seepage pit 9. Feed yard 12. Fertilizer storage<br>Direction from well? <b>West</b> How many feet? <b>50 ft. plus</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                             |                                  |                                 |
| 7 Contractor's or Landowner's Certification: This water well was 1. <input checked="" type="checkbox"/> constructed 2. reconstructed or 3. plugged under my jurisdiction and was completed on (mo/day/year) <b>3-1-2007</b> and this record is to the best of my knowledge and belief.<br>Kansas Water Well Contractor's License No. <b>236</b> This water well record was completed on (mo/day/year) <b>3-2-2007</b><br>under the business name of <b>Harp Well and Pump Service</b> by (signature) <b>Todd S. Harp</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                             |                                  |                                 |