

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																																																										
County: Sedgwick		NW ¼ SW ¼ SE ¼		1		T 29 S		R 1 E																																																																																																										
Distance and direction from nearest town or city street address of well if located within city? 9.5' S of SW Corner of Sidewalk, 722 N. Baltimore - Derby																																																																																																																		
2 WATER WELL OWNER: Atlantic Richfield Company, A BP Affiliated Company																																																																																																																		
RR#, St. Address, Box # : 2240 Bluestone Dr. Board of Agriculture, Division of Water Resources																																																																																																																		
City, State, ZIP Code : St. Charles, MO 63303 Application Number:																																																																																																																		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 65 ft. ELEVATION: 1316.90 (TOC)																																																																																																																
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 53.41 ft. below TOC measured on mo/day/yr 06/24/08 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 8.25 in. to 65 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 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 _____ No X																																																																																																																
		5 TYPE OF BLANK CASING USED:																																																																																																																
		1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) _____ Welded _____ 7 Fiberglass _____ Threaded _____ Flush _____ Blank casing diameter 2 in. to 45 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface Flushmount in., weight 0.703 lbs./ft. Wall thickness or gauge No. SCH. 40																																																																																																																
		TYPE OF SCREEN OR PERFORATION MATERIAL: 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: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 45 ft. to 65 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 44 ft. to 65 ft. From _____ ft. to _____ ft.																																																																																																																
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																																																																																																		
Grout Intervals From 2 ft. to 44 ft. From _____ ft. to _____ ft. 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 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage Direction from well? _____ How many feet? _____																																																																																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>25</td> <td></td> <td>Clay, with sand, medium brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>25</td> <td>55</td> <td></td> <td>Sandy Clay, sand content increases with depth, light brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>55</td> <td>60</td> <td></td> <td>Clay, with sand, light brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>60</td> <td>62</td> <td></td> <td>Sandy Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>62</td> <td>65</td> <td></td> <td>Clay, with sand, very light brown</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>										FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	25		Clay, with sand, medium brown				25	55		Sandy Clay, sand content increases with depth, light brown				55	60		Clay, with sand, light brown				60	62		Sandy Clay				62	65		Clay, with sand, very light brown																																																																		
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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/yr) 07/02/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 07/30/08 under the business name of Geotechnical Services Inc. by (signature) <i>Julie L. Turner</i>																																																																																																																		
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																																																		

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