

1 LOCATION OF WATER WELL: County: Sedgewick 087 Fraction: SE 1/4 SW 1/4 NE 1/4 Section Number: 4 Township Number: 29 S Range Number: 1 EW

Distance and direction from nearest town or city street address of well if located within city? 7522 S Pattie

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code

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

4 DEPTH OF COMPLETED WELL: 24 ft. ELEVATION: WELL'S STATIC WATER LEVEL: 12 ft. below land surface measured on mo/day/yr

5 TYPE OF BLANK CASING USED: 1 Steel, 2 PVC, 3 RMP (SR), 4 ABS, 5 Wrought iron, 6 Asbestos-Cement, 7 Fiberglass, 8 Concrete tile, 9 Other (specify below), CASING JOINTS: Glued, Clamped, Welded, Threaded.

6 GROUT MATERIAL: 1 Neat cement, 2 Cement grout, 3 Bentonite, 4 Other, Grout Intervals: From 0 ft. to 12 ft.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8-7-93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. NONE This Water Well Record was completed on (mo/day/yr) 8-10-93 under the business name of NONE by (signature) [Signature]

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.