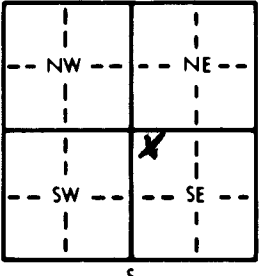


1 LOCATION OF WATER WELL: County: Sedgwick		Fraction NW 1/4 NW 1/4 SE 1/4	Section Number 12	Township Number T 29 S	Range Number R 1 E/W																								
Distance and direction from nearest town or city street address of well if located within city? Baltimore & Sunny Dell																													
2 WATER WELL OWNER: Fina O. I. Chemical																													
RR#, St. Address, Box # : City, State, ZIP Code :																													
Board of Agriculture, Division of Water Resources Application Number:																													
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL: 55.0 ft. ELEVATION: 45.0 ft. Depth(s) Groundwater Encountered 1 ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL 45.0 ft. below land surface measured on mo/day/yr 3/3/89 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 12.0 in. to _____ ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 0 Observation 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 _____ 0 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ Blank casing diameter 4.0 in. to 40.0 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 2.0 in., weight 2.0 lbs./ft. Wall thickness or gauge No. 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 0 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 3 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 40.0 ft. to 55.0 ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 30.0 ft. to 55.0 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.																													
6 GROUT MATERIAL: 0 Neat cement 30 Cement grout 0 Bentonite 4 Other _____ Grout Intervals: From 0 ft. to 30 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 0 Livestock pens 0 Fuel storage (former) 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Sepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) Direction from well? North How many feet? 50																													
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th></tr></thead><tbody><tr><td>0</td><td>18.0</td><td>SILTY CLAY: Reddish Brown</td><td></td><td></td><td></td></tr><tr><td>18.0</td><td>38.0</td><td>SANDY CLAY: Brown</td><td></td><td></td><td></td></tr><tr><td>38.0</td><td>55.0</td><td>SAND, SILTY SAND: PALE Brown</td><td></td><td></td><td></td></tr></tbody></table> Note: Casing height and grout interval do not meet Kansas Guidelines.						FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	18.0	SILTY CLAY: Reddish Brown				18.0	38.0	SANDY CLAY: Brown				38.0	55.0	SAND, SILTY SAND: PALE Brown			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 0 constructed, 1 reconstructed, or 3 plugged under my jurisdiction and was completed on (mo/day/year) 2/9/89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 496 This Water Well Record was completed on (mo/day/yr) 3/3/89 under the business name of Groundwater Technology by (signature) James James																													
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: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.																													