

|  |     |                       |  |                |   |                 |   |  |  |  |
|--|-----|-----------------------|--|----------------|---|-----------------|---|--|--|--|
| 1 LOCATION OF WATER WELL:  |     | Fraction              |  | Section Number |   | Township Number |   | Range Number                                     |  |  |
| County: <b>Wichita</b>   |     | <b>Nw ¼ Sw ¼ Se ¼</b> |  | <b>32</b>      |   | <b>T 16 S</b>   |   | <b>R 36</b> <span style="float:right">EAW</span> |  |  |
| Distance and direction from nearest town or city street address of well if located within city?  |     |                       |  |                |   |                 |   |  |  |  |
| 2 WATER WELL OWNER: <b>Frank E Whitham Trust</b>   |     |                       |  |                |   |                 |   |  |  |  |
| RR#, St. Address, Box # : <b>% Stewart Whitham, RR 2 Box 200</b>   |     |                       |  |                | Board of Agriculture, Division of Water Resources                 |                 |   |  |  |  |
| City, State, ZIP Code : <b>Leoti, Ks 67861</b>   |     |                       |  |                | Application Number: <b>8663</b>                                   |                 |   |  |  |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:   |     |                       | 4 DEPTH OF COMPLETED WELL <b>198</b> ft. ELEVATION:  |                |   |                 |   |  |  |  |
|  |     |                       | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.   |                |   |                 |   |  |  |  |
|  |     |                       | WELL'S STATIC WATER LEVEL <b>159</b> ft. below land surface measured on mo/day/yr  |                |   |                 |   |  |  |  |
|  |     |                       | 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 <b>28</b> in. to <b>198</b> 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)   |                |   |                 |   |  |  |  |
|  |     |                       | <input checked="" type="checkbox"/> 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well  |                |   |                 |   |  |  |  |
|  |     |                       | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ |                |   |                 |   |  |  |  |
|  |     |                       | Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____   |                |   |                 |   |  |  |  |
| 5 TYPE OF BLANK CASING USED:   |     |                       |  |                |   |                 |   |  |  |  |
| 1 Steel  |     |                       | 3 RMP (SR)   |                | 5 Wrought Iron  |                 | 8 Concrete tile                               |  | CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ |  |
| <input checked="" type="checkbox"/> 2 PVC  |     |                       | 4 ABS  |                | 6 Asbestos-Cement   |                 | 9 Other (specify below)                       |  | Welded _____   |  |
|  |     |                       | 7 Fiberglass   |                |   |                 |   |  | Threaded _____   |  |
| Blank casing diameter <b>28</b> in. to <b>148</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.  |     |                       |  |                |   |                 |   |  |  |  |
| Casing height above land surface <b>24</b> in., weight <b>16.15</b> lbs./ft. Wall thickness or gauge No. <b>.500</b>   |     |                       |  |                |   |                 |   |  |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |     |                       |  |                |   |                 |   |  |  |  |
| 1 Steel  |     |                       | 3 Stainless steel  |                | 5 Fiberglass  |                 | 8 RMP (SR)                                    |  | 10 Asbestos-cement   |  |
| 2 Brass  |     |                       | 4 Galvanized steel   |                | 6 Concrete tile   |                 | 9 ABS   |  | 11 Other (specify) _____   |  |
|  |     |                       |  |                |   |                 |   |  | 12 None used (open hole)   |  |
| SCREEN OR PERFORATION OPENINGS ARE:  |     |                       |  |                |   |                 |   |  |  |  |
| 1 Continuous slot  |     |                       | 3 Mill slot  |                | 5 Gauzed wrapped  |                 | <input checked="" type="checkbox"/> 8 Saw cut |  | 11 None (open hole)  |  |
| 2 Louvered shutter   |     |                       | 4 Key punched  |                | 6 Wire wrapped  |                 | 9 Drilled holes                               |  |  |  |
|  |     |                       |  |                | 7 Torch cut   |                 | 10 Other (specify) _____                      |  |  |  |
| SCREEN-PERFORATED INTERVALS: From <b>148</b> ft. to <b>198</b> ft. From _____ ft. to _____ ft.   |     |                       |  |                |   |                 |   |  |  |  |
| GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>198</b> ft. From _____ ft. to _____ ft.  |     |                       |  |                |   |                 |   |  |  |  |
| 6 GROUT MATERIAL: <input checked="" type="checkbox"/> 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____   |     |                       |  |                |   |                 |   |  |  |  |
| Grout Intervals From <b>0</b> ft. to <b>20</b> 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                        |  | <b>Old well</b>  |  |
| Direction from well? <b>N</b>  |     |                       |  |                | How many feet? <b>290</b>   |                 |   |  |  |  |
| FROM   | TO  | CODE                  | LITHOLOGIC LOG   |                |   | FROM            | TO  | PLUGGING INTERVALS                               |  |  |
| 0  | 2   |                       | Surface  |                |   |                 |   |  |  |  |
| 2  | 21  |                       | Loess  |                |   |                 |   |  |  |  |
| 21   | 33  |                       | Clay & caliche   |                |   |                 |   |  |  |  |
| 33   | 45  |                       | Cemented sand & caliche  |                |   |                 |   |  |  |  |
| 45   | 60  |                       | Fine to med sand w/clay strk   |                |   |                 |   |  |  |  |
| 60   | 87  |                       | Clay w/a few sand strk   |                |   |                 |   |  |  |  |
| 87   | 95  |                       | Clay   |                |   |                 |   |  |  |  |
| 95   | 103 |                       | Clay w/a few sand strk   |                |   |                 |   |  |  |  |
| 103  | 110 |                       | Fine sand w/clay strk  |                |   |                 |   |  |  |  |
| 110  | 124 |                       | Clay w/sand strk   |                |   |                 |   |  |  |  |
| 124  | 142 |                       | Fine sand w/clay strk  |                |   |                 |   |  |  |  |
| 142  | 182 |                       | Fine sand w/sandstone lens   |                |   |                 |   |  |  |  |
| 182  | 198 |                       | Fine to med sand & some  |                |   |                 |   |  |  |  |
|  |     |                       | Grave strk & clay strks  |                |   |                 |   |  |  |  |
| 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) <b>6-3-04</b> and this record is true to the best of my knowledge and belief. Kansas  |     |                       |  |                |   |                 |   |  |  |  |
| Water Well Contractor's License No. <b>554</b>   |     |                       |  |                | This Water Well Record was completed on (mo/day/yr) <b>7-2-04</b> |                 |   |  |  |  |
| under the business name of <b>Woofter Pump &amp; Well, Inc.</b>  |     |                       |  |                | by (signature) <i>[Signature]</i>                                 |                 |   |  |  |  |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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. |     |                       |  |                |   |                 |   |  |  |  |

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