

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <b>Harvey</b>		<b>NW ¼ SW ¼ SW ¼</b>		<b>12</b>		<b>T 23 S</b>		<b>R 3 W</b>	
Distance and direction from nearest town or city street address of well if located within city? <b>750 feet north of center of NW 12<sup>th</sup> Street, 60 feet east of center of Willow Lake Road</b>									
2 WATER WELL OWNER: <b>City of Wichita</b>									
RR#, St. Address, Box # : <b>6016 S. Spring Lake Road</b>									
City, State, ZIP Code : <b>Halstead, Kansas 67056</b>									
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 <b>125</b> ft. ELEVATION: <b>1450</b>							
		Depth(s) Groundwater Encountered 1 <b>57</b> ft. 2 _____ ft. 3 _____ ft.							
		WELL'S STATIC WATER LEVEL <b>57</b> ft. below land surface measured on mo/day/yr <b>8/15/2006</b>							
		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>8</b> in. to <b>12.5'</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)									
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes _____ No <b>X</b>									
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 <b>X</b>									
Blank casing diameter <b>2</b> in. to <b>105</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface <b>32</b> in., weight <b>0.68</b> lbs./ft. Wall thickness or gauge No. <b>Sch. 40</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 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>105</b> ft. to <b>125</b> ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From <b>103</b> ft. to <b>125</b> ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <b>volclay grout</b>									
Grout Intervals From <b>0</b> ft. to <b>103</b> 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? _____									
FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
see attached log									
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>08/05/2006</b> and this record is true to the best of my knowledge and belief. - Kansas									
Water Well Contractor's License No. <b>102</b> This Water Well Record was completed on (mo/day/yr) <b>08/15/2006</b>									
under the business name of <b>Layne Christensen Company</b> by (signature)									
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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## TEST HOLE REPORT

LAYNE Western, a Div. of  
LAYNE Christensen  
Wichita, Kansas

Contract Name: Wichita ASR	Test Hole No. RRW1 MN (d)
	Date: August 5, 2006
	Driller: Kevin Holub

Location of Test Hole:	Elevation of Test Hole:
	Static Water Level:
Page 1 of 2	Measured Hours After Completion

From	To	Description of Strata
0	5	red silty sand, very fine to medium, slight clay
5	10	light red, silty sand, very fine to medium, slight clay
10	15	red-orange silty sand, very fine to medium, slight clay
15	20	red-orange silty sand, very fine to medium
20	25	red sandy clayey silt, low plastic, very fine
25	30	red silty sandy clay to clayey sand, low plastic, fine
30	35	red silty sandy clay to clayey sand, low plastic, fine
35	40	red sandy silty clay, low plastic, fine
40	45	light red silty clay, low to medium plastic, slight sand
45	50	light red silty clay, low to medium plastic, slight sand
50	55	light red, silty clay, low plastic
55	60	light red sandy silty clay, low plastic, very fine
60	65	red, olive silty clay, low to medium plastic
65	70	olive silty clay, medium plastic
70	75	olive, red silty clay, low to medium plastic, slight sand
75	80	olive, red silty sandy clay, low to medium plastic, very fine to coarse
80	85	olive sand, very fine to coarse, slight clay
85	90	olive sand, very fine to coarse
90	95	olive sand, fine to coarse

**LAYNE Western, a Div. of  
LAYNE Christensen  
Wichita, Kansas**

Location of Test Hole:	Elevation of Test Hole:
	Static Water Level:
Page 2 of 2	Measured      Hours After Completion

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