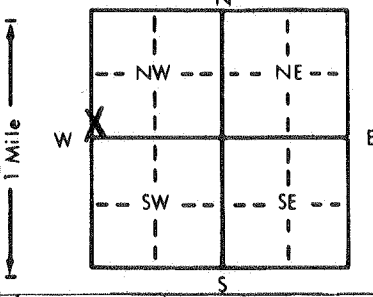


|                                               |  |                                                                                           |                     |                           |                          |
|-----------------------------------------------|--|-------------------------------------------------------------------------------------------|---------------------|---------------------------|--------------------------|
| 1 LOCATION OF WATER WELL:<br>County: SEDGWICK |  | Fraction<br>SW <sub>4</sub> SW <sub>1</sub> / <sub>4</sub> SW <sub>1</sub> / <sub>4</sub> | Section Number<br>1 | Township Number<br>T 25 S | Range Number<br>R 1 W EW |
|-----------------------------------------------|--|-------------------------------------------------------------------------------------------|---------------------|---------------------------|--------------------------|

Distance and direction from nearest town or city street address of well if located within city?  
 $\frac{1}{2}$  South of 125th No., East side of West Street Valley Center, KS.

|                                      |                        |                                                   |
|--------------------------------------|------------------------|---------------------------------------------------|
| 2 WATER WELL OWNER: James Stephenson |                        |                                                   |
| RR#, St. Address, Box # :            | 333 W. 21st #239       | Board of Agriculture, Division of Water Resources |
| City, State, ZIP Code :              | Wichita, KSansas 67203 | Application Number:                               |

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 65 ft. ELEVATION:   
 Depth(s) Groundwater Encountered 1. 35 ft. 2. ft. 3. ft.



4 DEPTH OF COMPLETED WELL ..... 65 ..... ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. .... 35 ..... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL ..... 35 ..... ft. below land surface measured on mo/day/yr ..... 9-4-87  
 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 ..... 11 in. to ..... ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS:  
     1 Domestic      3 Feedlot      6 Oil field water supply      9 Dewatering      11 Injection well  
     2 Irrigation      4 Industrial      7 Lawn and garden only      10 Observation well  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No ☒ ; If yes, mo/day/yr sample was sub-  
 mitted ..... Water Well Disinfected? Yes ☒ No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ☒ Clamped ☐  
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded ☐  
2 PVC 4 ~~ABS~~ 7 Fiberglass Cer-Mac styrene SDR-26 Threaded ☐  
Blank casing diameter 5 in. to 45 ft., Dia in. to ft., Dia in. to ft.  
Casing height above land surface 12 in., weight 1.59 lbs./ft. Wall thickness or gauge No. 203

|                                         |                    |                 |                   |                          |
|-----------------------------------------|--------------------|-----------------|-------------------|--------------------------|
| TYPE OF SCREEN OR PERFORATION MATERIAL: |                    |                 | 7 PVC             | 10 Asbestos-cement       |
| 1 Steel                                 | 3 Stainless steel  | 5 Fiberglass    | <u>8 RMP (SR)</u> | 11 Other (specify) ..... |
| 2 Brass                                 | 4 Galvanized steel | 6 Concrete tile | 9 ABS             | 12 None used (open hole) |

|                                     |               |                  |                          |                     |
|-------------------------------------|---------------|------------------|--------------------------|---------------------|
| SCREEN OR PERFORATION OPENINGS ARE: |               | 5 Gauzed wrapped | 8 Saw cut                | 11 None (open hole) |
| 1 Continuous slot                   | 3 Mill slot   | 6 Wire wrapped   | <u>9 Drilled holes</u>   |                     |
| 2 Louvered shutter                  | 4 Key punched | 7 Torch cut      | 10 Other (specify) ..... |                     |
|                                     | 45            | 65               |                          |                     |

|                              |                   |                     |                     |                  |     |
|------------------------------|-------------------|---------------------|---------------------|------------------|-----|
| SCREEN-PERFORATED INTERVALS: | From . . . . .    | ft. to . . . . .    | ft., From . . . . . | ft. to . . . . . | ft. |
|                              | From . . . . .    | ft. to . . . . .    | ft., From . . . . . | ft. to . . . . . | ft. |
| GRAVEL PACK INTERVALS:       | From . . . . . 24 | ft. to . . . . . 65 | ft., From . . . . . | ft. to . . . . . | ft. |
|                              | From . . . . .    | ft. to . . . . .    | ft., From . . . . . | ft. to . . . . . | ft. |

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
Grout Intervals: From ... 4 ... ft. to ... 24 ... 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 | .... None apparent ..... |

| Direction from well? |    | How many feet? |    |
|----------------------|----|----------------|----|
| FROM                 | TO | FROM           | TO |
|                      |    |                |    |

[illegible]

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) 9-4-87 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo/day/yr) 3-31-88 under the business name of Harp Well & Pump Service, Inc. by (signature) Mary Arnold

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.