

|                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                                             |                |                 |                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----------------------------------------------------------------------------------------------------------------------------|----------------|-----------------|--------------------|
| LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                |    | Fraction                                                                                                                    | Section Number | Township Number | Range Number       |
| County: Sedgwick                                                                                                                                                                                                                                                                                                                                                       |    | SW ¼ SW ¼ SW ¼                                                                                                              | 27             | T 25 S          | R 1W E (W)         |
| Distance and direction from nearest town or city street address of well if located within city?<br>1/8 East of Ridge, 1/8 North of 85th North Westside                                                                                                                                                                                                                 |    |                                                                                                                             |                |                 |                    |
| WATER WELL OWNER:<br>Hampton and Son Const.                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                             |                |                 |                    |
| RR#, St. Address, Box # :<br>P.O. Box 366                                                                                                                                                                                                                                                                                                                              |    | Board of Agriculture, Division of Water Resources                                                                           |                |                 |                    |
| City, State, ZIP Code :<br>Haysville, Ks. 67060                                                                                                                                                                                                                                                                                                                        |    | Application Number:                                                                                                         |                |                 |                    |
| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br><div style="text-align: center;">N<br/>+-----+<br/>           <br/>    NW    <br/>           <br/>+-----+<br/>           <br/>    SE    <br/>           <br/>+-----+<br/>S</div>                                                                                                                                 |    | 4 DEPTH OF COMPLETED WELL ..... 40 ft. ELEVATION: .....                                                                     |                |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                        |    | Depth(s) Groundwater Encountered 1..... 15 ft. 2..... ft. 3..... ft.                                                        |                |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                        |    | WELL'S STATIC WATER LEVEL ..... 15 ft. below land surface measured on mo/day/yr . 11-17-89 .....                            |                |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                        |    | 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 .... 11 in. to .... 40 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   10 Monitoring well .....                            |                |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                        |    | Was a chemical/bacteriological sample submitted to Department? Yes.....No... X; If yes, mo/day/yr sample was submitted      |                |                 |                    |
|                                                                                                                                                                                                                                                                                                                                                                        |    | Water Well Disinfected? Yes X No                                                                                            |                |                 |                    |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                           |    | CASING JOINTS: Glued ... X Clamped .....                                                                                    |                |                 |                    |
| 1 Steel                      3 RMP (SR)                                                                                                                                                                                                                                                                                                                                |    | 5 Wrought iron                      8 Concrete tile                      Welded .....                                       |                |                 |                    |
| 2 PVC                        4 ABS                                                                                                                                                                                                                                                                                                                                     |    | 6 Asbestos-Cement                9 Other (specify below)             Cer-Mac styrene SDR-26             Threaded .....      |                |                 |                    |
| Blank casing diameter .... 5 in. to .... 30 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                      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:                                                                                                                                                                                                                                                                                                                                    |    | 5 Gauzed wrapped                      8 Saw cut                                  11 None (open hole)                        |                |                 |                    |
| 1 Continuous slot                      3 Mill slot                                  6 Wire wrapped                      9 Unfiled holes                                                                                                                                                                                                                                |    |                                                                                                                             |                |                 |                    |
| 2 Louvered shutter                      4 Key punched                              7 Torch cut                              10 Other (specify) .....                                                                                                                                                                                                                   |    |                                                                                                                             |                |                 |                    |
| SCREEN-PERFORATED INTERVALS: From ..... 30 ft. to ..... 40 ft., From ..... ft. to ..... ft.                                                                                                                                                                                                                                                                            |    |                                                                                                                             |                |                 |                    |
| GRAVEL PACK INTERVALS: From ..... 243 ft. to ..... 40 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:                                                                                                                                                                                                                                                                                                                  |    | 10 Livestock pens                      14 Abandoned water well                                                              |                |                 |                    |
| 1 Septic tank                      4 Lateral lines                      7 Pit privy                                  11 Fuel storage                      15 Oil well/Gas well                                                                                                                                                                                         |    |                                                                                                                             |                |                 |                    |
| 2 Sewer lines                      5 Cess pool                                  8 Sewage lagoon                      12 Fertilizer storage                      16 Other (specify below)                                                                                                                                                                               |    |                                                                                                                             |                |                 |                    |
| 3 Watertight sewer lines    6 Seepage pit                              9 Feedyard                                  13 Insecticide storage .....                                                                                                                                                                                                                        |    |                                                                                                                             |                |                 |                    |
| Direction from well? West                                                                                                                                                                                                                                                                                                                                              |    | How many feet? 52                                                                                                           |                |                 |                    |
| FROM                                                                                                                                                                                                                                                                                                                                                                   | TO | LITHOLOGIC LOG                                                                                                              | FROM           | TO              | PLUGGING INTERVALS |
| 0                                                                                                                                                                                                                                                                                                                                                                      | 3  | topsoil                                                                                                                     |                |                 |                    |
| 3                                                                                                                                                                                                                                                                                                                                                                      | 20 | clay                                                                                                                        |                |                 |                    |
| 20                                                                                                                                                                                                                                                                                                                                                                     | 29 | fine sand                                                                                                                   |                |                 |                    |
| 29                                                                                                                                                                                                                                                                                                                                                                     | 40 | medium sand                                                                                                                 |                |                 |                    |
| 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) ..... 11-17-89 ..... 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) 4-30-90                                                                                                                                                                                                                                                         |    |                                                                                                                             |                |                 |                    |
| under the business name of Harp Well and 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 three copies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records. |    |                                                                                                                             |                |                 |                    |