

| 1 LOCATION OF WATER WELL:<br><b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | FRACTION<br><b>SW 1/4 NE 1/4 SW 1/4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Section Number<br><b>34</b>                                                           | Township Number<br><b>T 26 S</b> | Range Number<br><b>R 1W E/W</b> |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Distance and direction from nearest town or city street address of well if located within city?<br><b>29th Street and Ridge Road Wichita, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                       |                                  |                                 |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| WATER WELL OWNER: <b>WICHITA, CITY OF</b><br>RR#, ST. ADDRESS, BOX #: <b>455 N. Main</b><br>CITY, STATE, ZIP CODE: <b>Wichita, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Board of Agriculture, Division of Water Resource<br>Application Number: <b>980248</b> |                                  |                                 |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 4 DEPTH OF COMPLETED WELL <b>40</b> ft. ELEVATION:<br>Depth(s) groundwater Encountered <b>1</b> ft. <b>2</b> ft. <b>3</b> ft.<br>WELL'S STATIC WATER LEVEL <b>10</b> FT. BELOW LAND SURFACE MEASURED ON <b>mo/day/yr</b> <b>02/17/1999</b><br>Pump test data: Well water was ft. after hours pumping gpm<br>Est. Yield gpm: Well water was ft. after hours pumping gpm<br>Bore Hole Diameter <b>12</b> in. to <b>40</b> ft. and in. to ft.<br>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well<br>Was a chemical/bacteriological sample submitted to Department? Yes No <b>X</b> ; If yes, mo/day/yr sample was submitted<br>Water Well Disinfected? Yes <b>X</b> No             |                                                                                       |                                  |                                 |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5 TYPE OF CASING USED:<br>1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <b>X</b> Clamped<br>2 PVC 4 ABS 6 Asbestos-Cement 9 Other (Specify below) Welded<br>7 Fiberglass SDR-26 Threaded<br>Blank casing Diameter <b>8</b> in. to <b>20</b> ft., Dia in. to ft., Dia in. to ft.<br>Casing height above land surface <b>12</b> in., weight <b>5.52</b> lbs. / ft. Wall thickness or gauge No. <b>.332</b><br>TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement<br>1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 other (specify)<br>2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)<br>SCREEN OR PERFORATION OPENING ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)<br>1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes<br>2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) |                                                                                       |                                  |                                 |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | SCREEN-PERFORATION INTERVALS: from <b>20</b> ft. to <b>40</b> ft., From ft. to ft.<br>GRAVEL PACK INTERVALS: from <b>20</b> ft. to <b>40</b> ft., From ft. to ft.<br>from ft. to ft., From ft. to ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                       |                                  |                                 |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <b>bentonite hole plug</b><br>Grout Intervals: From <b>0</b> ft. to <b>20</b> ft. From ft. to ft. From ft. to ft.<br>What is the nearest source of possible contamination:<br>1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandon water well<br>2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well<br>3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)<br>13 Insecticide storage <b>None Apparent</b><br>Direction from well? How many feet?                                                                                                                                                                                                                                                                     |                                                                                       |                                  |                                 |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>3</td> <td>topsoil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>15</td> <td>medium sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>35</td> <td>coarse sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>35</td> <td>40</td> <td>medium sand</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                       |                                  |                                 | FROM               | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS | 0 | 3 | topsoil |  |  |  | 3 | 15 | medium sand |  |  |  | 15 | 35 | coarse sand |  |  |  | 35 | 40 | medium sand |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 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) <b>02/17/1999</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>236</b> This Water Well Record was completed on (mo/day/yr) <b>02/18/99</b><br>Under the business name of <b>Harp Well &amp; Pump Service, Inc.</b> by (signature) <b>Todd S. Harp</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                       |                                  |                                 |                    |    |                |      |    |                    |   |   |         |  |  |  |   |    |             |  |  |  |    |    |             |  |  |  |    |    |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |