WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. _____

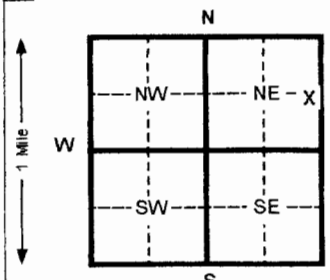
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: SEDGWICK	NE ¼ SE ¼ NE ¼	6	T 27S S	R 2W E/W

Distance and direction from nearest town or city street address of well if located within city?
2751 N. 215TH ST. W.; COLWICH

2 WATER WELL OWNER: CHARLES WEEKS
RR#, St. Address, Box # : 2751 N. 215TH ST. W.
City, State, ZIP Code : COLWICH, KS

Board of Agriculture, Division of Water Resources
Application Number:

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 97 ft. ELEVATION:
Depth(s) Groundwater Encountered 1 36 ft. 2 ft. 3 ft.
WELL'S STATIC WATER LEVEL 36 ft. below land surface measured on mo/day/yr 9/13/04
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 10 in. to 97 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 X If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes X No

OFFICE USE ONLY

5 TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass Threaded
Blank casing diameter 5 in. to 97 ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface 16 in., weight 160 lbs./ft. Wall thickness or gauge No. 26
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 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From 77 ft. to 97 ft. From ft. to ft.
From ft. to ft. From ft. to ft.
GRAVEL PACK INTERVALS: From 24 ft. to 97 ft. From ft. to ft.
From ft. to ft. From ft. to ft.

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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
Direction from well? WEST How many feet? 131

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3		TOPSOIL			
3	65		TAN CLAY			
65	75		FINE SILTY SAND			
75	85		TAN CLAY			
85	95		MED/COARSE SAND/GRAVEL			
95	97		BLUE SHALE			

RECEIVED
OCT 11 2004
BUREAU OF WATER

SEC

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) 9/13/04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/yr) 10/3/04 under the business name of CHASE DRILLING by (signature). R Chase

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.

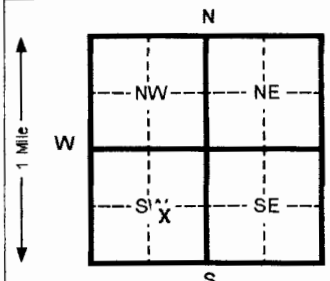
WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. _____

1 LOCATION OF WATER WELL: County: **SEDGWICK** | Fraction: **NW** ¼ **NE** ¼ **SW** ¼ | Section Number: **34** | Township Number: T **26S** S | Range Number: R **1W** E/W

Distance and direction from nearest town or city street address of well if located within city?
3222 N. NORTHSHORE; WICHITA

2 WATER WELL OWNER: **HEATH MARX**
RR#, St. Address, Box # : **3222 N. NORTH SHORE**
City, State, ZIP Code : **WICHITA, KS**
Board of Agriculture, Division of Water Resources
Application Number:

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL **40** ft. ELEVATION:
Depth(s) Groundwater Encountered 1 **12** ft. 2 ____ ft. 3 ____ ft.
WELL'S STATIC WATER LEVEL **12** ft. below land surface measured on mo/day/yr **9/2/05**
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 **10** 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 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 **X** If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass Threaded
Blank casing diameter **5** in. to **40** ft., Dia ____ in. to ____ ft., Dia ____ in. to ____ ft.
Casing height above land surface **16** in., weight **160** lbs./ft. Wall thickness or gauge No. **26**

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 Drilled 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.
From ____ ft. to ____ ft. From ____ ft. to ____ ft.
GRAVEL PACK INTERVALS: From **24** ft. to **30** 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 ____
Direction from well? **NORTH** How many feet? **15**

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		TOPSOIL			
2	11		CLAY			
11	36		MED/COARSE SAND/GRAVEL			
36	38		CLAY			
38	40		MED GRAVEL			

RECEIVED
OCT 11 2004
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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/yr) **9/2/04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **611** This Water Well Record was completed on (mo/day/yr) **10/3/04** under the business name of **CHASE DRILLING** by (signature) R. Chase

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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