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| 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>31</b> |  | TOWNSHIP NUMBER<br><b>T 26 S</b>                                        |  | RANGE NUMBER<br><b>R 1W E/W</b> |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>3227 N. Covington                      Wichita, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                             |  |                                                                         |  |                                 |  |
| 2 WATER WELL OWNER:<br>RR#,ST. ADDRESS,BOX #:<br>CITY, STATE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <b>SOCORA HOMES INC.<br/>P.O. Box 2907<br/>Wichita, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                             |  | Board of Agriculture, Division of Water Resource<br>Application Number: |  |                                 |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 4 DEPTH OF COMPLETED WELL: <b>65</b> ft.                      ELEVATION: _____ ft.<br>Depth of groundwater Encountered: _____ ft.<br>WELL'S STATIC WATER LEVEL <b>25</b> FT. BELOW LAND SURFACE MEASURED ON <b>7/20/09</b><br>Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm<br>Est. Yield: _____ gpm                      Well water was _____ ft. after _____ hours of pumping @ _____ gpm<br>Bore Hole Diameter <b>12</b> in.                      to <b>65</b> ft.                      and _____ in.                      to _____ ft.<br>WELL WATER TO BE USED AS:<br>1. Domestic    3. Feedlot    5. Public water supply <b>7. Lawn and garden only</b> 9. Dewatering    11. Injection well<br>2. Irrigation    4. Industrial    6. Oil field water supply    8. Air conditioning    10. Monitoring well    12. Other (Specify below) _____<br>Was a chemical/bacteriological sample submitted to Department? <b>YES</b> <b>NO</b> ; If yes, what mo/day/yr was sample submitted _____<br>Was Water Well Disinfected? <b>YES</b> <b>NO</b> |  |                             |  |                                                                         |  |                                 |  |
| 5 TYPE OF CASING USED:<br>1. Steel                      3. RPM (SR)                      5. Wrought Iron                      7. Fiberglass                      9. Other (Specify below)                      CASING JOINTS: <b>Glued</b> Threaded<br><b>2. PVC</b> 4. ABS                      6. Asbestos-Cement                      8. Concrete tile <b>SDR-26</b> Welded                      Clamped<br>Blank casing diameter <b>5</b> in.                      to <b>45</b> ft.,                      Dia. _____ in.                      to _____ ft.,                      Dia. _____ in.                      to _____ ft.<br>Casing height above land surface: <b>12</b> in.,                      Weight: <b>2.35</b> lbs. / ft.                      Wall thickness or gauge No. <b>.214</b><br>TYPE OF SCREEN OR PERFORATION MATERIAL:<br>1. Steel                      3. Stainless Steel                      5. Fiberglass <b>7. PVC</b> 9. ABS                      11. Other (specify) _____<br>2. Brass                      4. Galvanized                      6. Concrete Tile                      8. RMP (SR)                      10. Asbestos-Cement                      12. None used (open hole) _____<br>SCREEN OR PERFORATION OPENINGS ARE:<br>1. Continuous slot                      3. Mill slot                      5. Gauzed wrapped                      7. Torch cut                      9. Drilled holes                      11. None ( open hole)<br>2. Louvered shutter                      4. Key punched                      6. Wire wrapped <b>8. Saw cut</b> 10. Other (specify) _____<br>SCREEN - PERFORATION INTERVAL                      From <b>45</b> ft.                      to <b>65</b> ft.,                      From _____ ft.                      to _____ ft.<br>GRAVEL PACK INTERVALS:                      From <b>24</b> ft.                      to <b>65</b> ft.,                      From _____ ft.                      to _____ ft. |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                             |  |                                                                         |  |                                 |  |
| 6 GROUT MATERIALS:                      1. Neat cement                      2. Cement Grout                      3. Bentonite                      Other <b>bentonite hole plug</b><br>Grout Intervals: From <b>4</b> ft.                      to <b>24</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                      13. Insecticide storage                      15. Oil well/Gas well<br>2. Sewer lines                      5. Cess Pool                      8. Sewage lagoon                      11. Fuel storage                      14. Abandon water well                      16. Other (specify below) _____<br><b>3. Watertight sewer line</b> 6. Seepage pit                      9. Feed yard                      12. Fertilizer storage<br>Direction from well? <b>West</b> How many feet? <b>10 ft. plus</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                             |  |                                                                         |  |                                 |  |
| 7 Contractor's or Landowner's Certification: This water well was 1. <b>constructed</b> 2. reconstructed                      or                      3. plugged                      under my jurisdiction and was completed on (mo/day/year) <b>7-20-2009</b> and this record is to the best of my knowledge and belief.<br>Kansas Water Well Contractor's License No. <b>236</b> This water well record was completed on (mo/day/year) <b>7-22-2009</b><br>under the business name of <b>Harp Well and Pump Service</b> by (signature) <b>Todd S. Harp</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                             |  |                                                                         |  |                                 |  |