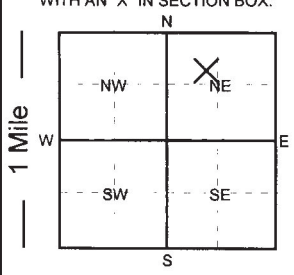


**WATER WELL RECORD Form WWC-5 KSA 82a-1212**

<b>1</b> LOCATION OF WATER WELL: <b>Sedgwick</b>	FRACTION <b>SE 1/4 NW 1/4 NE 1/4</b>	SECTION NUMBER <b>27</b>	TOWNSHIP NUMBER <b>T 26 S</b>	RANGE NUMBER <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?  
**4540 N. Sunny Circle Wichita, Kansas**

<b>2</b> WATER WELL OWNER: <b>GRAY HOMES LLC, Paul</b>	Board of Agriculture, Division of Water Resource
RR#,ST. ADDRESS,BOX #: <b>P.O. Box 780725</b>	Application Number:
CITY, STATE: <b>Wichita, Kansas</b>	ZIP CODE: <b>67278</b>

<b>3</b> LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	<b>4</b> DEPTH OF COMPLETED WELL: <b>40</b> ft. ELEVATION: Depth of groundwater Encountered: _____ ft. WELL'S STATIC WATER LEVEL <b>15</b> FT. BELOW LAND SURFACE MEASURED ON <b>6/11/20</b> Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm Est. Yield: _____ gpm Well water was _____ ft. after _____ hours of pumping @ _____ gpm Bore Hole Diameter <b>12</b> in. to <b>40</b> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 1. Domestic 3. Feedlot 5. Public water supply <b>7. Lawn and garden only</b> 9. Dewatering 11. Injection well 2. Irrigation 4. Industrial 6. Oil field water supply 8. Air conditioning 10. Monitoring well 12. Other (Specify below) Was a chemical/bacteriological sample submitted to Department? <b>NO</b> ; If yes, what mo/day/yr was sample submitted Was Water Well Disinfected? <b>YES</b> NO
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<b>5</b> TYPE OF CASING USED: 1. Steel <input type="radio"/> 3. RPM (SR) <input type="radio"/> <b>2. PVC</b> <input checked="" type="radio"/> 4. ABS <input type="radio"/> 5. Wrought Iron <input type="radio"/> 7. Fiberglass <input type="radio"/> 9. Other (Specify below) <b>SDR-26</b>	CASING JOINTS: <b>Glued</b> <input checked="" type="radio"/> Threaded <input type="radio"/> Welded <input type="radio"/> Clamped <input type="radio"/>
Blank casing diameter <b>5</b> in. to <b>30</b> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.	Casing height above land surface: <b>12</b> in., Weight: <b>2.35</b> lbs. / ft. Wall thickness or gauge No. <b>.214</b>
TYPE OF SCREEN OR PERFORATION MATERIAL: 1. Steel <input type="radio"/> 3. Stainless Steel <input type="radio"/> 5. Fiberglass <input type="radio"/> <b>7. PVC</b> <input checked="" type="radio"/> 9. ABS <input type="radio"/> 11. Other (specify) _____ 2. Brass <input type="radio"/> 4. Galvanized <input type="radio"/> 6. Concrete Tile <input type="radio"/> 8. RMP (SR) <input type="radio"/> 10. Asbestos-Cement <input type="radio"/> 12. None used (open hole) _____	
SCREEN OR PERFORATION OPENINGS ARE: 1. Continuous slot <input type="radio"/> 3. Mill slot <input type="radio"/> 5. Gauzed wrapped <input type="radio"/> <b>7. Torch cut</b> <input type="radio"/> 9. Drilled holes <input type="radio"/> 11. None (open hole) <input type="radio"/> 2. Louvered shutter <input type="radio"/> 4. Key punched <input type="radio"/> 6. Wire wrapped <input type="radio"/> <b>8. Saw cut</b> <input checked="" type="radio"/> 10. Other (specify) _____	
SCREEN - PERFORATION INTERVAL	From <b>30</b> ft. to <b>40</b> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS:	From <b>24</b> ft. to <b>40</b> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

<b>6</b> GROUT MATERIALS: 1. Neat cement <input type="radio"/> 2. Cement Grout <input type="radio"/> 3. Bentonite <input type="radio"/> Other <b>bentonite hole plug</b> <input checked="" type="radio"/>	Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From <b>4</b> ft. to <b>24</b> ft.
What is the nearest source of possible contamination: 1. Septic tank <input type="radio"/> 4. Lateral lines <input type="radio"/> 7. Pit privy <input type="radio"/> 10. Livestock pens <input type="radio"/> 13. Insecticide storage <input type="radio"/> 15. Oil well/Gas well <input type="radio"/> 2. Sewer lines <input type="radio"/> 5. Cess Pool <input type="radio"/> 8. Sewage lagoon <input type="radio"/> 11. Fuel storage <input type="radio"/> 14. Abandon water well <input type="radio"/> 16. Other (specify below) _____ <b>3. Watertight sewer line</b> <input checked="" type="radio"/> 6. Seepage pit <input type="radio"/> 9. Feed yard <input type="radio"/> 12. Fertilizer storage <input type="radio"/>	
Direction from well? <b>South</b>	How many feet? <b>20 ft. plus</b>

From	To	LITHOLOGIC LOG	From	To	LITHOLOGIC LOG
0	3	sandy topsoil			
3	23	fine sand			
23	40	medium sand			

<b>7</b> Contractor's or Landowner's Certification: This water well was 1. <b>constructed</b> <input checked="" type="radio"/> 2. reconstructed <input type="radio"/> or 3. plugged <input type="radio"/> under my jurisdiction and was completed on (mo/day/year) <b>6/11/2020</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/year) <b>6/15/2020</b> under the business name of <b>Harp Well and Pump Service</b> by (signature) <i>Todd S. Harp</i>
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