

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------|---------------------------------------------------|----------------------------------------------------------------------|--|--|--|
| <b>1 LOCATION OF WATER WELL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Fraction                                                                                                                                                  | Section Number                                    | Township Number         | Range Number                                      |                                                                      |  |  |  |
| County: <b>SEDGWICK</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <b>NE 1/4 NE 1/4 SE 1/4</b>                                                                                                                               | <b>13</b>                                         | <b>T 26 S</b>           | <b>R 2 E</b>                                      |                                                                      |  |  |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>COLEMAN PLANT - MAIZE KS CW-6</b>                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| <b>2 WATER WELL OWNER: COLEMAN CO</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| RR#, St. Address, Box # <b>Box 1762</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                           | Board of Agriculture, Division of Water Resources |                         |                                                   |                                                                      |  |  |  |
| City, State, ZIP Code <b>WICHITA KS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                           | Application Number:                               |                         |                                                   |                                                                      |  |  |  |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>4 DEPTH OF COMPLETED WELL: 44.5 ft. ELEVATION:</b>                                                                                                     |                                                   |                         |                                                   |                                                                      |  |  |  |
| <div style="text-align: center;">N<br/>1 Mile<br/>W<br/>E<br/>S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>                                                                                                                                                                                                                                                                              |  | NW                                                                                                                                                        | NE                                                | SW                      | SE                                                | Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft. |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | NW                                                                                                                                                        | NE                                                |                         |                                                   |                                                                      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | SW                                                                                                                                                        | SE                                                |                         |                                                   |                                                                      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | WELL'S STATIC WATER LEVEL <b>16</b> ft. below land surface measured on mo/day/yr                                                                          |                                                   |                         |                                                   |                                                                      |  |  |  |
| 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 <b>8</b> in. to <b>44.5</b> 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 <b>10 Monitoring well</b>                                                                                |                                                   |                         |                                                   |                                                                      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Was a chemical/bacteriological sample submitted to Department? Yes.....No..... <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted |                                                   |                         |                                                   |                                                                      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Water Well Disinfected? Yes.....No..... <input checked="" type="checkbox"/>                                                                               |                                                   |                         |                                                   |                                                                      |  |  |  |
| <b>5 TYPE OF BLANK CASING USED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 3 RMP (SR)                                                                                                                                                | 5 Wrought iron                                    | 8 Concrete tile         | CASING JOINTS: Glued.....Clamped.....             |                                                                      |  |  |  |
| <b>2 PVC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 4 ABS                                                                                                                                                     | 6 Asbestos-Cement                                 | 9 Other (specify below) | Welded.....                                       |                                                                      |  |  |  |
| Blank casing diameter <b>2</b> in. to .... ft., Dia                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | 7 Fiberglass                                                                                                                                              |                                                   |                         | Threaded..... <input checked="" type="checkbox"/> |                                                                      |  |  |  |
| Casing height above land surface.....in., weight.....lbs./ft. Wall thickness or gauge No.                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 3 Stainless steel                                                                                                                                         | 5 Fiberglass                                      | <b>7 PVC</b>            | 10 Asbestos-cement                                |                                                                      |  |  |  |
| 2 Brass                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 4 Galvanized steel                                                                                                                                        | 6 Concrete tile                                   | 8 RMP (SR)              | 11 Other (specify).....                           |                                                                      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                           |                                                   | 9 ABS                   | 12 None used (open hole)                          |                                                                      |  |  |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| 1 Continuous slot                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | <b>3 Mill slot</b>                                                                                                                                        | 5 Gauzed wrapped                                  | 8 Saw cut               | 11 None (open hole)                               |                                                                      |  |  |  |
| 2 Louvered shutter                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | 4 Key punched                                                                                                                                             | 6 Wire wrapped                                    | 9 Drilled holes         |                                                   |                                                                      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                           | 7 Torch cut                                       | 10 Other (specify)..... |                                                   |                                                                      |  |  |  |
| SCREEN-PERFORATED INTERVALS: From <b>34</b> ft. to <b>44</b> ft., From .... ft. to .... ft.                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| GRAVEL PACK INTERVALS: From <b>33</b> ft. to <b>44</b> ft., From .... ft. to .... ft.                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| <b>6 GROUT MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| 1 Neat cement                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 2 Cement grout                                                                                                                                            | <b>3 Bentonite</b>                                | 4 Other.....            |                                                   |                                                                      |  |  |  |
| Grout Intervals: From <b>0</b> ft. to <b>33</b> 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  | <b>PLANT</b>                                      |                                                                      |  |  |  |
| Direction from well? <b>WITHIN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| How many feet?                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | TO                                                                                                                                                        | LITHOLOGIC LOG                                    |                         | PLUGGING INTERVALS                                |                                                                      |  |  |  |
| <b>0</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | <b>8</b>                                                                                                                                                  | <b>CLAY</b>                                       |                         |                                                   |                                                                      |  |  |  |
| <b>8</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | <b>TD</b>                                                                                                                                                 | <b>SAND + GRAVEL</b>                              |                         |                                                   |                                                                      |  |  |  |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <b>(1)</b> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>2/20/92</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>102</b> This Water Well Record was completed on (mo/day/yr) <b>3/5/92</b> under the business name of <b>Royce Western</b> by (signature) <b>Royce Western</b> |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.                                                                                                                       |  |                                                                                                                                                           |                                                   |                         |                                                   |                                                                      |  |  |  |