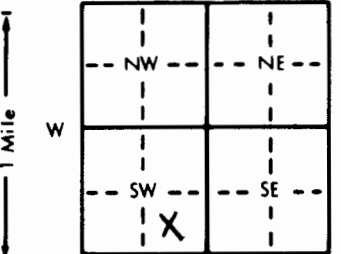


sec. 5

KSA 82a-1212

1 LOCATION OF WATER WELL: County: Sedgewick		Fraction: SW 1/4 SE SW 1/4	Section Number: 36E	Township Number: T 27 S	Range Number: R 1 EW																																										
Distance and direction from nearest town or city street address of well if located within city? 2409 N Chadsworth & Wichita KS																																															
2 WATER WELL OWNER: Willie Cole RR#, St. Address, Box #: 2409 N Chadsworth & City, State, ZIP Code: Wichita KS. 67205 Board of Agriculture, Division of Water Resources Application Number:																																															
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL: 62 ft. ELEVATION: 32 ft. Depth(s) Groundwater Encountered: 1. 32 ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL: 30 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: 10 in. to 62 UN ft., and UN in. to UN ft. WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No																																													
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded Blank casing diameter in. to 62 ft., Dia in. to ft., Dia in. to ft. Casing height above land surface 14 in., weight lbs./ft. Wall thickness or gauge No. 26 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes SCREEN-PERFORATED INTERVALS: From 50 ft. to 62 ft., From ft. to ft. GRAVEL PACK INTERVALS: From 25 ft. to 62 ft., From ft. to ft.																																															
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From 3 ft. to 25 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? 65																																															
<table><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>2</td><td>TOPSOIL</td><td></td><td></td><td></td></tr><tr><td>2</td><td>27</td><td>clay</td><td></td><td></td><td></td></tr><tr><td>27</td><td>32</td><td>fine sand</td><td></td><td></td><td></td></tr><tr><td>32</td><td>46</td><td>med sand</td><td></td><td></td><td></td></tr><tr><td>46</td><td>51</td><td>clay</td><td></td><td></td><td></td></tr><tr><td>51</td><td>62</td><td>med sand to coarse gravel</td><td></td><td></td><td></td></tr></tbody></table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	2	TOPSOIL				2	27	clay				27	32	fine sand				32	46	med sand				46	51	clay				51	62	med sand to coarse gravel			
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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) 4-17-97 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) 4-17-97 under the business name of Chase Drilling by (signature) [Signature]																																															
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.																																															