

|                                  |  |                 |                       |                        |                     |
|----------------------------------|--|-----------------|-----------------------|------------------------|---------------------|
| <b>1 LOCATION OF WATER WELL:</b> |  | <b>Fraction</b> | <b>Section Number</b> | <b>Township Number</b> | <b>Range Number</b> |
| County: Sedawick                 |  | NW ¼ NW ¼ SE ¼  | 27                    | T 27 S                 | R E/M               |

Distance and direction from nearest town or city street address of well if located within city?  
**6333 W. Kellogg, Wichita; 182' S of SW corner of Chuck Dahlem**

|                                                  |  |                                                          |
|--------------------------------------------------|--|----------------------------------------------------------|
| <b>2 WATER WELL OWNER:</b> Souder Service Center |  | <b>Board of Agriculture, Division of Water Resources</b> |
| RR#, St. Address, Box #: 11409 Lost Creek Circle |  | <b>Application Number:</b>                               |
| City, State, ZIP Code: Wichita, KS 67212         |  |                                                          |

|                                                             |  |                                            |                               |
|-------------------------------------------------------------|--|--------------------------------------------|-------------------------------|
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> |  | <b>4 DEPTH OF COMPLETED WELL:</b> 18.0 ft. | <b>ELEVATION:</b> 1307.55 TOC |
|-------------------------------------------------------------|--|--------------------------------------------|-------------------------------|

Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.

WELL'S STATIC WATER LEVEL 13.39 . . . . . ft. below land surface measured on mo/day/yr 10/28/97

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 . . . 8 . . . in. to . . . . . 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 |
| 2 Irrigation          | 4 Industrial       | 7 Lawn and garden only   |
|                       |                    | 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 . . . . . No X . . . . .

|                                     |            |                       |                         |                                                         |
|-------------------------------------|------------|-----------------------|-------------------------|---------------------------------------------------------|
| <b>5 TYPE OF BLANK CASING USED:</b> |            | <b>5 Wrought iron</b> | <b>8 Concrete tile</b>  | <b>CASING JOINTS:</b> Glued . . . . . Clamped . . . . . |
| 1 Steel                             | 3 RMP (SR) | 6 Asbestos-Cement     | 9 Other (specify below) | Welded . . . . .                                        |
| 2 PVC                               | 4 ABS      | 7 Fiberglass          |                         | Threaded flush                                          |

Blank casing diameter . . . 2 . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.

Casing height above land surface flush . . . . . in., weight 0.703 . . . . . lbs./ft. Wall thickness or gauge No. sch 40

|                                                |                    |                           |
|------------------------------------------------|--------------------|---------------------------|
| <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> |                    | <b>10 Asbestos-cement</b> |
| 1 Steel                                        | 3 Stainless steel  | 8 RMP (SR)                |
| 2 Brass                                        | 4 Galvanized steel | 9 ABS                     |
|                                                | 6 Concrete tile    | 12 None used (open hole)  |

**SCREEN OR PERFORATION OPENINGS ARE:**

|                    |               |                  |                    |                     |
|--------------------|---------------|------------------|--------------------|---------------------|
| 1 Continuous slot  | 8 Mill slot   | 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 . . . 8 . . . ft. to . . . 18 . . . ft., From . . . . . ft. to . . . . . ft.

**GRAVEL PACK INTERVALS:** From . . . 6 . . . ft. to . . . 18 . . . ft., From . . . . . ft. to . . . . . ft.

|                          |  |                      |                       |                    |                |
|--------------------------|--|----------------------|-----------------------|--------------------|----------------|
| <b>6 GROUT MATERIAL:</b> |  | <b>1 Neat cement</b> | <b>2 Cement grout</b> | <b>3 Bentonite</b> | <b>4 Other</b> |
|--------------------------|--|----------------------|-----------------------|--------------------|----------------|

Grout Intervals: From . . . 1 . . . ft. to . . . 6 . . . 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? N

How many feet? 250

| FROM | TO | LITHOLOGIC LOG     | FROM | TO | PLUGGING INTERVALS |
|------|----|--------------------|------|----|--------------------|
| 0    | 7  | clay, sandy, silty |      |    |                    |
| 7    | 15 | sand, f-m grained  |      |    |                    |
| 15   | 18 | sand, f-vc grained |      |    |                    |

|                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 10/28/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 11-19-97 under the business name of GSI 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.