

|                                                                                                                                                   |  |                                                                                      |  |                |  |                 |  |              |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------|--|----------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                         |  | Fraction                                                                             |  | Section Number |  | Township Number |  | Range Number |  |
| County: SEDGWICK                                                                                                                                  |  | NE 1/4 SE 1/4 SW 1/4                                                                 |  | 4              |  | T 27S S         |  | R 1W EW      |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                   |  |                                                                                      |  |                |  |                 |  |              |  |
| 2 WATER WELL OWNER: GINETTE HUELSMAN                                                                                                              |  |                                                                                      |  |                |  |                 |  |              |  |
| RR#, St. Address, Box #: 8402 MEADOW PASS Board of Agriculture, Division of Water Resources                                                       |  |                                                                                      |  |                |  |                 |  |              |  |
| City, State, ZIP Code: WICHITA, KS Application Number:                                                                                            |  |                                                                                      |  |                |  |                 |  |              |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                              |  | 4 DEPTH OF COMPLETED WELL 90 ft. ELEVATION:                                          |  |                |  |                 |  |              |  |
|                                                                                                                                                   |  | Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.                                   |  |                |  |                 |  |              |  |
|                                                                                                                                                   |  | WELL'S STATIC WATER LEVEL 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 90 ft. and in. to ft.                                   |  |                |  |                 |  |              |  |
|                                                                                                                                                   |  | WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well |  |                |  |                 |  |              |  |
|                                                                                                                                                   |  | 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) |  |                |  |                 |  |              |  |
|                                                                                                                                                   |  | 2 Irrigation 4 Industrial 7 (domestic) 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 X 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                                                                                      |  |                                                                                      |  |                |  |                 |  |              |  |
| 7 Fiberglass Threaded                                                                                                                             |  |                                                                                      |  |                |  |                 |  |              |  |
| Blank casing diameter 5 in. to 90 ft., Dia in. to ft., Dia in. to ft.                                                                             |  |                                                                                      |  |                |  |                 |  |              |  |
| Casing height above land surface 14 in., weight 160 lbs./ft. Wall thickness or gauge No. 26                                                       |  |                                                                                      |  |                |  |                 |  |              |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                           |  |                                                                                      |  |                |  |                 |  |              |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement                                                                                   |  |                                                                                      |  |                |  |                 |  |              |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)                                                                          |  |                                                                                      |  |                |  |                 |  |              |  |
| 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                                                                                   |  |                                                                                      |  |                |  |                 |  |              |  |
| 7 Torch cut 10 Other (specify)                                                                                                                    |  |                                                                                      |  |                |  |                 |  |              |  |
| SCREEN-PERFORATED INTERVALS: From 70 ft. to 90 ft. From ft. to ft.                                                                                |  |                                                                                      |  |                |  |                 |  |              |  |
| GRAVEL PACK INTERVALS: From 24 ft. to 90 ft. From ft. to ft.                                                                                      |  |                                                                                      |  |                |  |                 |  |              |  |
| 6 GROUT MATERIAL:                                                                                                                                 |  |                                                                                      |  |                |  |                 |  |              |  |
| 1 Neat cement 2 Cement grout 3 Bentonite 4 Other                                                                                                  |  |                                                                                      |  |                |  |                 |  |              |  |
| Grout intervals From 4 ft. to 24 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? 25                                                                                                       |  |                                                                                      |  |                |  |                 |  |              |  |
| FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS                                                                                            |  |                                                                                      |  |                |  |                 |  |              |  |
| 0 3 TOPSOIL                                                                                                                                       |  |                                                                                      |  |                |  |                 |  |              |  |
| 3 27 CLAY                                                                                                                                         |  |                                                                                      |  |                |  |                 |  |              |  |
| 27 34 FINE SAND AND CLAY                                                                                                                          |  |                                                                                      |  |                |  |                 |  |              |  |
| 34 48 FINE SAND                                                                                                                                   |  |                                                                                      |  |                |  |                 |  |              |  |
| 48 64 CLAY                                                                                                                                        |  |                                                                                      |  |                |  |                 |  |              |  |
| 64 90 MED SAND                                                                                                                                    |  |                                                                                      |  |                |  |                 |  |              |  |
| 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/yr) 12-10-02 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) 12-10-02                                              |  |                                                                                      |  |                |  |                 |  |              |  |
| under the business name of CHASE DRILLING by (signature) RICK CHASE                                                                               |  |                                                                                      |  |                |  |                 |  |              |  |

OFFICE USE ONLY

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