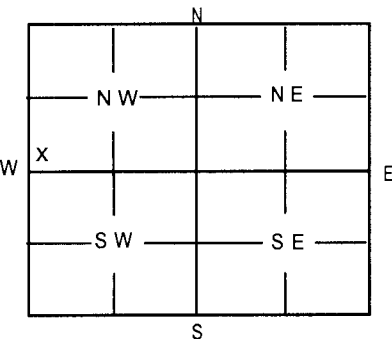
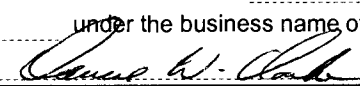


| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | LOCATION OF WATER WELL:<br>County: <b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Fraction<br><b>SW 1/4 SW 1/4 NW 1/4</b> | Section Number<br><b>36</b> | Township Number<br><b>T 27 S</b> | Range Number<br><b>R 1 E</b> |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------|----------------------------------|------------------------------|---------------|-----------------------|--------------------|--------------------------|--------------------------|---------------------------|-----------------------|----------------------------|--------------------------|-----------------|------------------------|-------------------|-----------------|------------|-------------------------|--|-------------|-------------------|----------------------|--|--|--|--|--|
| Distance and direction from nearest town or city street address of well if located within city?<br><b>At 1950 S. West St. (Northeast of the intersection of West St. and May Ave.)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | WATER WELL OWNER: <b>Avery Dennison</b><br>RR#, St. Address, Box # <b>1950 S. West St.</b><br>City, State, ZIP Code <b>Wichita, KS 67213</b><br>Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br><div style="text-align: center;">  </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DEPTH OF WELL <b>23.3</b> ft<br>WELL'S STATIC WATER LEVEL <b>14.8</b> ft.<br>WELL WAS USED AS:<br><table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><b>10 Monitoring Well</b></td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> Was a chemical / bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/><br>If yes, mo/day/yr sample was submitted _____<br>Water Well Disinfected: Yes _____ No <input checked="" type="checkbox"/>                                                                                                                                                  |                                         |                             |                                  |                              | 1 Domestic    | 5 Public Water Supply | 9 Dewatering       | 2 Irrigation             | 6 Oil Field Water Supply | <b>10 Monitoring Well</b> | 3 Feedlot             | 7 Domestic (Lawn & Garden) | 11 Injection Well        | 4 Industrial    | 8 Air Conditioning     | 12 Other          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 1 Domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 5 Public Water Supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 9 Dewatering                            |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 2 Irrigation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 6 Oil Field Water Supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>10 Monitoring Well</b>               |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 3 Feedlot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 7 Domestic (Lawn & Garden)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 11 Injection Well                       |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 4 Industrial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 8 Air Conditioning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 12 Other                                |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TYPE OF BLANK CASING USED:<br><table style="width:100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td><b>2 PVC</b></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> Blank casing diameter <b>2</b> in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/><br>Casing height above or <b>below</b> land surface <b>48</b> in. If yes, how much <b>Cut off</b>                                                                                                                                                                                                                                                                                                                                                                                             |                                         |                             |                                  |                              | 1 Steel       | 3 RMP (SR)            | 5 Wrought          | 7 Fiberglass             | 9 Other (Specify below)  | <b>2 PVC</b>              | 4 ABS                 | 6 Asbestos-Cement          | 8 Concrete Tile          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 3 RMP (SR)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 5 Wrought                               | 7 Fiberglass                | 9 Other (Specify below)          |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| <b>2 PVC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4 ABS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 6 Asbestos-Cement                       | 8 Concrete Tile             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | GROUT PLUG MATERIAL: <b>1 Neat Cement</b> 2 Cement grout 3 Bentonite 4 Other<br>Grout Plug Intervals: From <b>23.3</b> ft. to <b>1</b> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft.<br>What is the nearest source of possible contamination:<br><table style="width:100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td><b>None known</b></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table> Direction from well? _____ How many feet? _____ |                                         |                             |                                  |                              | 1 Septic tank | 6 Seepage pit         | 11 Fuel storage    | 16 Other (specify below) | 2 Sewer lines            | 7 Pit privy               | 12 Fertilizer storage |                            | 3 Watertight sewer lines | 8 Sewage lagoon | 13 Insecticide storage | <b>None known</b> | 4 Lateral lines | 9 Feedyard | 14 Abandoned water well |  | 5 Cess Pool | 10 Livestock pens | 15 Oil well/Gas well |  |  |  |  |  |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 6 Seepage pit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 11 Fuel storage                         | 16 Other (specify below)    |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 7 Pit privy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 12 Fertilizer storage                   |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 3 Watertight sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 8 Sewage lagoon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 13 Insecticide storage                  | <b>None known</b>           |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 4 Lateral lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 9 Feedyard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 14 Abandoned water well                 |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 5 Cess Pool                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 10 Livestock pens                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 15 Oil well/Gas well                    |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:15%;">TO</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">23.3</td> <td style="text-align: center;">1</td> <td>Neat Cement</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> <td>Compacted Soil</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              | FROM          | TO                    | PLUGGING MATERIALS | 23.3                     | 1                        | Neat Cement               | 1                     | 0                          | Compacted Soil           |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | TO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | PLUGGING MATERIALS                      |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 23.3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Neat Cement                             |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Compacted Soil                          |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |
| 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>6-15-04</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>185</b> This Water Well Record was completed on (mo/day/year) <b>6-24-04</b> under the business name of <b>Clarke Well &amp; Equipment, Inc.</b><br>by (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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |                             |                                  |                              |               |                       |                    |                          |                          |                           |                       |                            |                          |                 |                        |                   |                 |            |                         |  |             |                   |                      |  |  |  |  |  |