

| 1 LOCATION OF WATER WELL:<br><b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | FRACTION<br><del>NW</del> 1/4 <del>SE</del> 1/4 <del>NE</del> 1/4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | SECTION NUMBER<br><b>2</b> | TOWNSHIP NUMBER<br>T <b>27</b> S | RANGE NUMBER<br>R <b>1W</b> E/W |                            |    |                |      |    |                |  |  |  |          |          |                       |  |  |  |          |           |                            |  |  |  |           |           |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Distance and direction from nearest town or city street address of well if located within city?<br><b>4601 Emerald Bay      Wichita, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                            |                                  |                                 |                            |    |                |      |    |                |  |  |  |          |          |                       |  |  |  |          |           |                            |  |  |  |           |           |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 WATER WELL OWNER: <b>ROBL CONSTRUCTION</b><br>RR#, ST. ADDRESS, BOX #: <b>5842 W. 21st St. N.</b><br>CITY, STATE: <b>Wichita, Kansas</b><br>ZIP CODE: _____ Application Number: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                            |                                  |                                 |                            |    |                |      |    |                |  |  |  |          |          |                       |  |  |  |          |           |                            |  |  |  |           |           |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 4 DEPTH OF <del>CASED</del> <b>plugged</b> WELL: <b>40</b> ft. ELEVATION: _____<br>Depth of groundwater Encountered: _____ ft.<br>WELL'S STATIC WATER LEVEL <b>10</b> FT. BELOW LAND SURFACE MEASURED ON <b>mo/day/yr:</b> <b>3/6/09</b><br>Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm<br>Est. Yield: _____ gpm Well water was _____ ft. after _____ hours of pumping @ _____ gpm<br>Bore Hole Diameter _____ in. to _____ ft. and _____ in. to _____ ft.<br>WELL WATER USES USED AS:<br>1. Domestic    3. Feedlot    5. Public water supply <u>7. Lawn and garden only</u> 9. Dewatering    11. Injection well<br>2. Irrigation    4. Industrial    6. Oil field water supply    8. Air conditioning    10. Monitoring well    12. Other (Specify below)<br>Was a chemical/bacteriological sample submitted to Department? YES NO ; If yes, what mo/day/yr was sample submitted _____<br>Was Water Well Disinfected? <u>YES</u> NO |                            |                                  |                                 |                            |    |                |      |    |                |  |  |  |          |          |                       |  |  |  |          |           |                            |  |  |  |           |           |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SCREEN OR PERFORATION OPENINGS ARE:<br>1. Continuous slot    3. Mill slot    5. Gauzed wrapped    7. Torch cut    9. Drilled holes    11. None ( open hole)<br>2. Louvered shutter    4. Key punched    6. Wire wrapped    8. Saw cut    10. Other (specify) <b>N/A</b><br>SCREEN - PERFORATION INTERVAL    From _____ ft. to _____ ft.,    From _____ ft. to _____ ft.,    From _____ ft. to _____ ft.<br>GRAVEL PACK INTERVALS:    From _____ ft. to _____ ft.,    From _____ ft. to _____ ft.,    From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                           |                            |                                  |                                 |                            |    |                |      |    |                |  |  |  |          |          |                       |  |  |  |          |           |                            |  |  |  |           |           |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 GROUT MATERIALS:    1. Neat cement    2. Cement Grout    3. Bentonite    Other <b>bentonite hole plug</b><br>Grout Intervals:    From _____ ft. to _____ ft.,    From _____ ft. to _____ ft.,    From <b>3</b> ft. to <b>23</b> ft.<br>What is the nearest source of possible contamination:<br>1. Septic tank    4. Lateral lines    7. Pit privy    10. Livestock pens    13. Insecticide storage    15. Oil well/Gas well<br>2. Sewer lines    5. Cess Pool    8. Sewage lagoon    11. Fuel storage    14. Abandon water well    16. Other (specify below)<br>3. Watertight sewer line    6. Seepage pit    9. Feed yard    12. Fertilizer storage <b>None Apparent</b><br>Direction from well? _____ How many feet? _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                            |                                  |                                 |                            |    |                |      |    |                |  |  |  |          |          |                       |  |  |  |          |           |                            |  |  |  |           |           |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">From</th> <th style="width:10%;">To</th> <th style="width:40%;">LITHOLOGIC LOG</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> <th style="width:20%;">LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td><b>0</b></td> <td><b>3</b></td> <td><b>compacted clay</b></td> </tr> <tr> <td></td> <td></td> <td></td> <td><b>3</b></td> <td><b>23</b></td> <td><b>bentonite hole plug</b></td> </tr> <tr> <td></td> <td></td> <td></td> <td><b>23</b></td> <td><b>40</b></td> <td><b>coarse sand</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                            |                                  |                                 | From                       | To | LITHOLOGIC LOG | From | To | LITHOLOGIC LOG |  |  |  | <b>0</b> | <b>3</b> | <b>compacted clay</b> |  |  |  | <b>3</b> | <b>23</b> | <b>bentonite hole plug</b> |  |  |  | <b>23</b> | <b>40</b> | <b>coarse sand</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 7 Contractor's or Landowner's Certification: This water well was 1. <b>constructed</b> 2. <b>reconstructed</b> or    3. <u><b>plugged</b></u> under my jurisdiction and was completed on (mo/day/year) <b>3/6/2009</b> and this record is true to the best of my knowledge and belief.<br>Kansas Water Well Contractor's License No. <b>236</b> This water well record was completed on (mo/day/year) <b>3/9/2009</b><br>under the business name of <b>Harp Well and Pump Service</b> by (signature) <b>Todd S. Harp</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                            |                                  |                                 |                            |    |                |      |    |                |  |  |  |          |          |                       |  |  |  |          |           |                            |  |  |  |           |           |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |