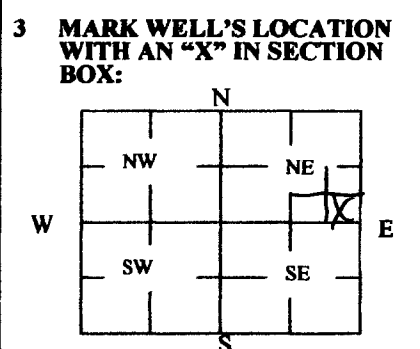


1 LOCATION OF WATER WELL: Fraction 1/4 SE 1/4 NE 1/4 SE 1/4 Section Number 17 Township Number T 27 S Range Number 1 E W
 County: Sedgwick

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 908 n wood

Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Datum: WGS84, NAD83, NAD27
 Collection Method:
 GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER:
 RR#, St. Address, Box #: 908 n wood
 City, State ZIP Code: Wichita KS. 67212



4 DEPTH OF WELL 25 ft.
 WELL'S STATIC WATER LEVEL 16 ft in basement
 WELL WAS USED AS:
 Domestic Irrigation Feedlot Industrial
 Public Water Supply Oil Field Water Supply Domestic (Lawn & Garden) Air Conditioning
 Dewatering Monitoring Injection Well Other _____
 Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile
 Blank casing diameter 1 1/4 in. Was casing pulled? Yes No If yes, how much 25 feet
 Casing height above or below land surface below in. 0

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Plug Intervals: From 16 ft. to 0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel storage Other (specify below)
 Sewer lines Pit privy Fertilizer storage
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well Direction from well? West
 Cess pool Livestock pens Oil well/Gas well How many feet? 10

| FROM | TO | PLUGGING MATERIALS | FROM | TO | PLUGGING MATERIALS |
|-----------|----------|--------------------------|------|----|--------------------|
| <u>16</u> | <u>0</u> | <u>Cement grout</u> | | | |
| | | <u>To basement floor</u> | | | |
| | | | | | |
| | | | | | |
| | | | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8-9-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 472. This Water Well Record was completed on (mo/day/year) 8-9-16 under the business name of Borden Pump & Well by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.