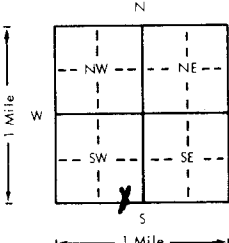


|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 |                                                              |                               |    |                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------|----|----------------|
| 1 LOCATION OF WATER WELL                                                                                                                                                                                                                                                                                                                                      |    | Fraction                                  | Section Number                                                                                  | Township Number                                              | Range Number                  |    |                |
| County: <u>SEDGWICK</u>                                                                                                                                                                                                                                                                                                                                       |    | <u>SE</u> 1/4 <u>SE</u> 1/4 <u>SW</u> 1/4 | <u>2</u>                                                                                        | <u>T</u> <u>27</u> <u>S</u>                                  | <u>R</u> <u>1W</u> <u>XEW</u> |    |                |
| Distance and direction from nearest town or city?<br><u>4900 West 21st</u>                                                                                                                                                                                                                                                                                    |    |                                           | Street address of well if located within city?<br><u>4900 West 21st St.,    Wichita, Kansas</u> |                                                              |                               |    |                |
| 2 WATER WELL OWNER: <u>Big River Sand &amp; Gravel Co.</u>                                                                                                                                                                                                                                                                                                    |    |                                           |                                                                                                 |                                                              |                               |    |                |
| RR#, St. Address, Box # : <u>8027 W. Kellogg</u>                                                                                                                                                                                                                                                                                                              |    |                                           | Board of Agriculture, Division of Water Resources                                               |                                                              |                               |    |                |
| City, State, ZIP Code : <u>Wichita, Kansas</u>                                                                                                                                                                                                                                                                                                                |    |                                           | Application Number:                                                                             |                                                              |                               |    |                |
| 3 DEPTH OF COMPLETED WELL: <u>44</u> ft. Bore Hole Diameter: <u>30</u> in. to    ft., and    in. to    ft.                                                                                                                                                                                                                                                    |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Well Water to be used as:                                                                                                                                                                                                                                                                                                                                     |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 1 Domestic    3 Feedlot                                                                                                                                                                                                                                                                                                                                       |    | 5 Public water supply                     |                                                                                                 | 8 Air conditioning                                           |                               |    |                |
| 2 Irrigation    4 Industrial                                                                                                                                                                                                                                                                                                                                  |    | 6 Oil field water supply                  |                                                                                                 | 9 Dewatering                                                 |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    | 7 Lawn and garden only                    |                                                                                                 | 10 Observation well                                          |                               |    |                |
| Well's static water level: <u>15</u> ft. below land surface measured on                                                                                                                                                                                                                                                                                       |    | <u>5</u> month                            |                                                                                                 | (water used to cool bearings) <u>22</u> day <u>1979</u> year |                               |    |                |
| Pump Test Data: Well water was    ft. after    hours pumping    gpm                                                                                                                                                                                                                                                                                           |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Est. Yield    gpm: Well water was    ft. after    hours pumping    gpm                                                                                                                                                                                                                                                                                        |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 4 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                  |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 1 Steel    3 RMP (SR)                                                                                                                                                                                                                                                                                                                                         |    | 5 Wrought iron                            |                                                                                                 | 8 Concrete tile                                              |                               |    |                |
| 2 PVC    4 ABS                                                                                                                                                                                                                                                                                                                                                |    | 6 <u>Asbestos-Cement</u>                  |                                                                                                 | 9 Other (specify below)                                      |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    | 7 <u>Fiberglass</u>                       |                                                                                                 | Casing Joints: Glued    Clamped <u>X</u>                     |                               |    |                |
| Blank casing dia: <u>16</u> in. to <u>29</u> ft., Dia                                                                                                                                                                                                                                                                                                         |    | in. to    ft., Dia                        |                                                                                                 | in. to    ft., Dia                                           |                               |    |                |
| Casing height above land surface: <u>12</u> in., weight <u>37</u> lbs./ft.                                                                                                                                                                                                                                                                                    |    | Wall thickness or gauge No. <u>3/4"</u>   |                                                                                                 | Welded    Threaded                                           |                               |    |                |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                       |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 1 <u>Steel</u>                                                                                                                                                                                                                                                                                                                                                |    | 3 Stainless steel                         |                                                                                                 | 5 Fiberglass                                                 |                               |    |                |
| 2 Brass                                                                                                                                                                                                                                                                                                                                                       |    | 4 Galvanized steel                        |                                                                                                 | 6 Concrete tile                                              |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    | 7 PVC                                     |                                                                                                 | 8 RMP (SR)                                                   |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    | 9 ABS                                     |                                                                                                 | 10 Asbestos-cement                                           |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 11 Other (specify)                                           |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 12 None used (open hole)                                     |                               |    |                |
| Screen or Perforation Openings Are:                                                                                                                                                                                                                                                                                                                           |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 1 Continuous slot                                                                                                                                                                                                                                                                                                                                             |    | 3 Mill slot                               |                                                                                                 | 5 Gauzed wrapped                                             |                               |    |                |
| 2 Louvered shutter                                                                                                                                                                                                                                                                                                                                            |    | 4 Key punched                             |                                                                                                 | 6 <u>Wire wrapped</u>                                        |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 7 Torch cut                                                  |                               |    |                |
| Screen-Perforation Dia: <u>16</u> in. to <u>44</u> ft., Dia                                                                                                                                                                                                                                                                                                   |    | in. to    ft., Dia                        |                                                                                                 | in. to    ft., Dia                                           |                               |    |                |
| Screen-Perforated Intervals: From <u>29</u> ft. to <u>44</u> ft., From    ft. to    ft.                                                                                                                                                                                                                                                                       |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Gravel Pack Intervals: From <u>10</u> ft. to <u>44</u> ft., From    ft. to    ft.                                                                                                                                                                                                                                                                             |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 5 GROUT MATERIAL:                                                                                                                                                                                                                                                                                                                                             |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 1 Neat cement                                                                                                                                                                                                                                                                                                                                                 |    | 2 <u>Cement grout</u>                     |                                                                                                 | 3 Bentonite                                                  |                               |    |                |
| 4 Other                                                                                                                                                                                                                                                                                                                                                       |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From    ft. to    ft.                                                                                                                                                                                                                                                                                  |    |                                           |                                                                                                 |                                                              |                               |    |                |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                         |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                 |    | 4 Cess pool                               |                                                                                                 | 7 Sewage lagoon                                              |                               |    |                |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                 |    | 5 Seepage pit                             |                                                                                                 | 8 Feed yard                                                  |                               |    |                |
| 3 Lateral lines                                                                                                                                                                                                                                                                                                                                               |    | 6 Pit privy                               |                                                                                                 | 9 Livestock pens                                             |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 10 Fuel storage                                              |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 11 Fertilizer storage                                        |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 12 Insecticide storage                                       |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 13 Watertight sewer lines                                    |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 14 Abandoned water well                                      |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 15 Oil well/Gas well                                         |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | 16 Other (specify below)                                     |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    |                                           |                                                                                                 | NONE APPARENT                                                |                               |    |                |
| Direction from well:    How many feet    ? Water Well Disinfected? Yes <u>X</u> No                                                                                                                                                                                                                                                                            |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Was a chemical/bacteriological sample submitted to Department? Yes    No <u>X</u> If yes, date sample                                                                                                                                                                                                                                                         |    |                                           |                                                                                                 |                                                              |                               |    |                |
| was submitted    month    day    year: Pump Installed? Yes <u>X</u> No                                                                                                                                                                                                                                                                                        |    |                                           |                                                                                                 |                                                              |                               |    |                |
| If Yes: Pump Manufacturer's name: <u>Valley Pump</u> Model No. <u>12XLE-2-A</u> HP <u>50</u> Volts <u>460</u>                                                                                                                                                                                                                                                 |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Depth of Pump Intake: <u>35</u> ft. Pumps Capacity rated at <u>1500</u> gal./min.                                                                                                                                                                                                                                                                             |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Type of pump: 1 Submersible    2 Turbine <u>X</u> 3 Jet    4 Centrifugal    5 Reciprocating    6 Other                                                                                                                                                                                                                                                        |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was                                                                                                                                                                                                     |    |                                           |                                                                                                 |                                                              |                               |    |                |
| completed on <u>5</u> month <u>22</u> day <u>1979</u> year                                                                                                                                                                                                                                                                                                    |    |                                           |                                                                                                 |                                                              |                               |    |                |
| and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>236</u>                                                                                                                                                                                                                                         |    |                                           |                                                                                                 |                                                              |                               |    |                |
| This Water Well Record was completed on <u>10</u> month <u>30</u> day <u>1979</u> year under the business                                                                                                                                                                                                                                                     |    |                                           |                                                                                                 |                                                              |                               |    |                |
| name of <u>Harp Well &amp; Pump Service, Inc.</u> by (signature) <u>M. Arnold</u>                                                                                                                                                                                                                                                                             |    |                                           |                                                                                                 |                                                              |                               |    |                |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                          |    |                                           |                                                                                                 |                                                              |                               |    |                |
|                                                                                                                                                                                                                                                                             |    | FROM                                      | TO                                                                                              | LITHOLOGIC LOG                                               | FROM                          | TO | LITHOLOGIC LOG |
|                                                                                                                                                                                                                                                                                                                                                               |    | 0                                         | 2                                                                                               | Topsoil                                                      |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    | 2                                         | 15                                                                                              | Fine to Medium Sand                                          |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    | 15                                        | 25                                                                                              | Fine to Coarse Sand and gravel                               |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |    | 25                                        | 43                                                                                              | Medium to Coarse sand and gravel                             |                               |    |                |
|                                                                                                                                                                                                                                                                                                                                                               | 43 | 44                                        | Blue Shale                                                                                      |                                                              |                               |    |                |
| ELEVATION:                                                                                                                                                                                                                                                                                                                                                    |    |                                           |                                                                                                 |                                                              |                               |    |                |
| Depth(s) Groundwater Encountered 1.    ft. 2.    ft. 3.    ft. 4.    ft. (Use a second sheet if needed)                                                                                                                                                                                                                                                       |    |                                           |                                                                                                 |                                                              |                               |    |                |
| INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records. |    |                                           |                                                                                                 |                                                              |                               |    |                |