

|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------|----------------|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                        |    | Fraction                                                                                                                                                    |      | Section Number |                | Township Number |  | Range Number |  |
| County: <b>SEDGWICK</b>                                                                                                                                                                                                                                                                                                                                                                                                          |    | NW 1/4 SE 1/4 NW 1/4                                                                                                                                        |      | 36             |                | T 27 S          |  | R 1 W        |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                                                                                  |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
| 1719 South Leonine                                                                                                                                                                                                                                                                                                                                                                                                               |    | Wichita, Kansas                                                                                                                                             |      |                |                |                 |  |              |  |
| 2 WATER WELL OWNER:                                                                                                                                                                                                                                                                                                                                                                                                              |    | Midwest Drywall                                                                                                                                             |      |                |                |                 |  |              |  |
| RR#, St. Address, Box # :                                                                                                                                                                                                                                                                                                                                                                                                        |    | 1719 South Leonine                                                                                                                                          |      |                |                |                 |  |              |  |
| City, State, ZIP Code :                                                                                                                                                                                                                                                                                                                                                                                                          |    | Wichita, KS.                                                                                                                                                |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Board of Agriculture, Division of Water Resources                                                                                                           |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Application Number:                                                                                                                                         |      |                |                |                 |  |              |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                             |    | 4 DEPTH OF COMPLETED WELL: 55 ft. ELEVATION:                                                                                                                |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Depth(s) Groundwater Encountered 1. 15 ft. 2. ft. 3. ft.                                                                                                    |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | WELL'S STATIC WATER LEVEL 15 ft. below land surface measured on mo/day/yr 4-16-86                                                                           |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Pump test data: Well water was ft. after hours pumping gpm                                                                                                  |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Est. Yield gpm: Well water was ft. after hours pumping gpm                                                                                                  |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Bore Hole Diameter 11 in. to ft. and in. to ft.                                                                                                             |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | WELL WATER TO BE USED AS:                                                                                                                                   |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Was a chemical/bacteriological sample submitted to Department? Yes.....No...XX...; If yes, mo/day/yr sample was submitted                                   |      |                |                |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | Water Well Disinfected? Yes XX No                                                                                                                           |      |                |                |                 |  |              |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                     |    | 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Clamped                                                                                              |      |                |                |                 |  |              |  |
| 1 Steel 3 RMP (SR)                                                                                                                                                                                                                                                                                                                                                                                                               |    | 6 Asbestos-Cement 9 Other (specify below) Welded                                                                                                            |      |                |                |                 |  |              |  |
| 2 PVC 4 ABS                                                                                                                                                                                                                                                                                                                                                                                                                      |    | 7 Fiberglass Cer-Mac styrene SDR-26 Threaded                                                                                                                |      |                |                |                 |  |              |  |
| Blank casing diameter 5 in. to 40 ft. Dia                                                                                                                                                                                                                                                                                                                                                                                        |    | in. to ft. Dia in. to ft.                                                                                                                                   |      |                |                |                 |  |              |  |
| Casing height above land surface 12 in., weight 1.59 lbs./ft. Wall thickness or gauge No. 203                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                          |    | 7 PVC 10 Asbestos-cement                                                                                                                                    |      |                |                |                 |  |              |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)                                                                                                                                                                                                                                                                                                                                                             |    | 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)                                                                                   |      |                |                |                 |  |              |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                              |    | 5 Gauzed wrapped 8 Saw cut 11 None (open hole)                                                                                                              |      |                |                |                 |  |              |  |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes                                                                                                                                                                                                                                                                                                                                                                     |    | 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)                                                                                             |      |                |                |                 |  |              |  |
| SCREEN-PERFORATED INTERVALS:                                                                                                                                                                                                                                                                                                                                                                                                     |    | From 40 ft. to 55 ft. From ft. to ft.                                                                                                                       |      |                |                |                 |  |              |  |
| GRAVEL PACK INTERVALS:                                                                                                                                                                                                                                                                                                                                                                                                           |    | From 14 ft. to 55 ft. From ft. to ft.                                                                                                                       |      |                |                |                 |  |              |  |
| 6 GROUT MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                |    | 1 Neat cement 2 Cement grout 3 Bentonite 4 Other                                                                                                            |      |                |                |                 |  |              |  |
| Grout Intervals: From 4 ft. to 14 ft. From ft. to ft. From ft. to ft.                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                                                                                            |    | 10 Livestock pens 14 Abandoned water well                                                                                                                   |      |                |                |                 |  |              |  |
| 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well                                                                                                                                                                                                                                                                                                                                                   |    | 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)                                                                    |      |                |                |                 |  |              |  |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage None Apparent                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
| Direction from well?                                                                                                                                                                                                                                                                                                                                                                                                             |    | How many feet?                                                                                                                                              |      |                |                |                 |  |              |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                             | TO | LITHOLOGIC LOG                                                                                                                                              | FROM | TO             | LITHOLOGIC LOG |                 |  |              |  |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                | 3  | Topsoil                                                                                                                                                     |      |                |                |                 |  |              |  |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                | 17 | Clay                                                                                                                                                        |      |                |                |                 |  |              |  |
| 17                                                                                                                                                                                                                                                                                                                                                                                                                               | 38 | Fine Sand                                                                                                                                                   |      |                |                |                 |  |              |  |
| 38                                                                                                                                                                                                                                                                                                                                                                                                                               | 55 | Medium Sand                                                                                                                                                 |      |                |                |                 |  |              |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-16-86 and this record is true to the best of my knowledge and belief. Kansas                                                                                                                                                                      |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
| Water Well Contractor's License No. 236 This Water Well Record was completed on (mo/day/yr) 5-20-86                                                                                                                                                                                                                                                                                                                              |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
| under the business name of Harp Well & Pump Service, Inc. by (signature) Mary Arnold                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                                                             |      |                |                |                 |  |              |  |
| 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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records. |    |                                                                                                                                                             |      |                |                |                 |  |              |  |