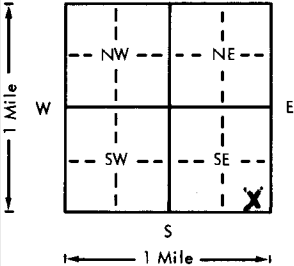


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

BILLED TO : GENERAL CONTRACTORS INC.

|                                                                                                                                                                                       |  |                                                        |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 |                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|------------------------------|
| 1. Location of well:                                                                                                                                                                  |  | County<br><b>SEDGWICK</b>                              | Fraction<br><b>SE 1/4 SE 1/4 SE 1/4</b> | Section number<br><b>27</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Township number<br><b>T 27S</b> | Range number<br><b>R 2 E</b> |
| 2. Distance and direction from nearest town or city:<br><b>1349 Tapestry meadows</b>                                                                                                  |  | 3. Owner of well:<br><b>JIM GOOLSBY</b>                |                                         | R.R. or street:<br><b>1551 30.151 ST WEST</b>                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |                              |
| Street address of well location if in city:<br><b>WICHITA, KANSAS</b>                                                                                                                 |  | City, state, zip code:<br><b>GODDARD, KANSAS</b>       |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 |                              |
| 4. Locate with "X" in section below:<br>                                                              |  | Sketch map:                                            |                                         | 6. Bore hole dia. <b>11</b> in. Completion date <b>6-3-76</b><br>Well depth <b>120</b> ft.                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                              |
| 5. Type and color of material                                                                                                                                                         |  | From                                                   | To                                      | 7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary                                                                                                                                                                     |                                 |                              |
| <b>DIRT</b>                                                                                                                                                                           |  | <b>0</b>                                               | <b>3</b>                                | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other                                                                                                                      |                                 |                              |
| <b>CLAY</b>                                                                                                                                                                           |  | <b>3</b>                                               | <b>21</b>                               | 9. Casing: Material <b>STYRENE</b> Weight: <b>12</b> lbs./ft.<br>Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in.<br>RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft.<br>Dia. <b>5</b> in. to <b>120</b> ft. depth Wall Thickness: inches <b>12.00</b><br>Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. <b>12.00</b> |                                 |                              |
| <b>SHALE</b>                                                                                                                                                                          |  | <b>21</b>                                              | <b>120</b>                              | 10. Screen: Manufacturer's name <b>SUNFLOWER PLASTIC</b><br>Type <b>STYRENE</b> Dia. <b>5"</b><br>Slot/gauze <b>.06</b> Length <b>30</b><br>Set between <b>40</b> ft. and <b>120</b> ft.<br>Gravel pack? <b>YES</b> Size range of material <b>14-18</b>                                                                                                                                                                                                                     |                                 |                              |
|                                                                                                                                                                                       |  |                                                        |                                         | 11. Static water level: <b>30</b> ft. below land surface Date <b>6-3-76</b>                                                                                                                                                                                                                                                                                                                                                                                                 |                                 |                              |
|                                                                                                                                                                                       |  |                                                        |                                         | 12. Pumping level below land surfaces:<br>____ ft. after ____ hrs. pumping ____ g.p.m.<br>____ ft. after ____ hrs. pumping ____ g.p.m.<br>Estimated maximum yield ____ g.p.m.                                                                                                                                                                                                                                                                                               |                                 |                              |
|                                                                                                                                                                                       |  |                                                        |                                         | 13. Water sample submitted: ____ mo./day/yr.<br>____ Yes ____ No Date ____                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                              |
|                                                                                                                                                                                       |  |                                                        |                                         | 14. Well head completion: <b>12 CAPPED</b><br>Pitless adapter ____ inches above grade                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                              |
|                                                                                                                                                                                       |  |                                                        |                                         | 15. Well grouted? <b>YES</b><br>With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete<br>Depth: From <b>40</b> ft. to <b>14</b> ft.                                                                                                                                                                                                                                                                    |                                 |                              |
|                                                                                                                                                                                       |  |                                                        |                                         | 16. Nearest source of possible contamination:<br>ft. <b>70</b> Direction <b>NW</b> Type <b>SEPTIC</b><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ____ No                                                                                                                                                                                                                                                                                  |                                 |                              |
|                                                                                                                                                                                       |  |                                                        |                                         | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name ____<br>Model number ____ HP ____ Volts ____<br>Length of drop pipe ____ ft. capacity ____ g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other                                                        |                                 |                              |
| 18. Elevation:<br><br>Topography:<br><input checked="" type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  | 19. Remarks:<br><b>PUMP NOT INSTALLED AT THIS TIME</b> |                                         | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>HARP Well + Pump 236</b><br>Business name <b>WICHITA, KANSAS</b> License No. ____<br>Address <b>WICHITA, KANSAS</b><br>Signed <b>Marshall</b> Date <b>8-9-76</b><br>Authorized representative                                                                                                               |                                 |                              |

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5