

| <b>1 LOCATION OF WATER WELL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           |    | Fraction                                                                                                                                                                                                                                                                                                | Township Number        | Range Number                                                             |                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------------------------------------------------------------|--------------------|
| County: <b>SEDGWICH</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | <b>SE ¼ SW ¼ NE ¼</b>                                                                                                                                                                                                                                                                                   | <b>12 T 27 S R 2 E</b> | <b>(N)</b>                                                               |                    |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| <b>2 WATER WELL OWNER: JOYCE BOONE SHELTON</b>                                                                                                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| RR#, St. Address, Box # :                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | City, State, ZIP Code :                                                                                                                                                                                                                                                                                 |                        | Board of Agriculture, Division of Water Resources<br>Application Number: |                    |
| 1805 N. 119 <sup>th</sup> WEST<br><b>Wichita, KS 67235</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>                                                                                                                                                                                                                                                                                                                                                                                                                |    | <b>4 DEPTH OF COMPLETED WELL . . . . . 16 . . . ft. ELEVATION:</b>                                                                                                                                                                                                                                      |                        |                                                                          |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.                                                                                                                                                                                                                           |                        |                                                                          |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | WELL'S STATIC WATER LEVEL . . . . . 14 . . . ft. below land surface measured on mo/day/yr <b>8/31/92</b>                                                                                                                                                                                                |                        |                                                                          |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | 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 . . . . . in. to . . . . . ft., and . . . . . in. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                                      |    | WELL WATER TO BE USED AS:                                                                                                                                                                                                                                                                               |                        |                                                                          |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | 5 Public water supply      8 Air conditioning      11 Injection well<br><input checked="" type="checkbox"/> 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 Monitoring well |                        |                                                                          |                    |
| Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                         |    | If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                  |                        |                                                                          |                    |
| Water Well Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| <b>5 TYPE OF BLANK CASING USED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| 1 Steel      3 RMP (SR)                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | 5 Wrought iron      8 Concrete tile                                                                                                                                                                                                                                                                     |                        | CASING JOINTS: Glued . . . . . Clamped . . . . .                         |                    |
| 2 PVC      4 ABS                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    | 6 Asbestos-Cement <input checked="" type="checkbox"/> Other (specify below) <b>BRICK</b>                                                                                                                                                                                                                |                        | Welded . . . . .                                                         |                    |
| Blank casing diameter . . . . . 36 . . . in. to . . . . . 16 . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.                                                                                                                                                                                                                                                                                                                             |    | Threaded . . . . .                                                                                                                                                                                                                                                                                      |                        |                                                                          |                    |
| Casing height above land surface . . . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . .                                                                                                                                                                                                                                                                                                                                                              |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| 1 Steel      3 Stainless steel      5 Fiberglass      8 RMP (SR)                                                                                                                                                                                                                                                                                                                                                                                                           |    | 7 PVC      10 Asbestos-cement                                                                                                                                                                                                                                                                           |                        |                                                                          |                    |
| 2 Brass      4 Galvanized steel      6 Concrete tile      9 ABS                                                                                                                                                                                                                                                                                                                                                                                                            |    | 11 Other (specify) . . . . .                                                                                                                                                                                                                                                                            |                        |                                                                          |                    |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | 12 None used (open hole)                                                                                                                                                                                                                                                                                |                        |                                                                          |                    |
| 1 Continuous slot      3 Mill slot      5 Gauzed wrapped      8 Saw cut      11 None (open hole)                                                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| 2 Louvered shutter      4 Key punched      6 Wire wrapped      9 Drilled holes                                                                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| SCREEN-PERFORATED INTERVALS: From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                      |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| GRAVEL PACK INTERVALS: From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| <b>6 GROUT MATERIAL:</b> 1 Neat cement      2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite      4 Other . . . . .                                                                                                                                                                                                                                                                                                                                          |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| Grout Intervals: From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| 1 Septic tank      4 Lateral lines      7 Pit privy      10 Livestock pens      14 Abandoned water well                                                                                                                                                                                                                                                                                                                                                                    |    | 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                                                                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| Direction from well?                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    | How many feet? <b>IN PEN (SMALL PASTURE LOT)</b>                                                                                                                                                                                                                                                        |                        |                                                                          |                    |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | TO | LITHOLOGIC LOG                                                                                                                                                                                                                                                                                          | FROM                   | TO                                                                       | PLUGGING INTERVALS |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                                                         | 16                     | 14                                                                       | Chlorinated SAND   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                                                         | 14                     | 5                                                                        | SUBSOIL            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                                                         | 5                      | 4 1/2                                                                    | BENTONITE          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                                                         | 4 1/2                  | 0                                                                        | SOIL               |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>8/31/92</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>1500</b> . This Water Well Record was completed on (mo/day/yr) <b>8/31/92</b> under the business name of <b>KSU</b> by (signature) <b>Danny H. Rogers</b> |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |
| 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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.                                                                                                            |    |                                                                                                                                                                                                                                                                                                         |                        |                                                                          |                    |