WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: SEDGWICK	SE ¼ NW ¼ NE ¼	13	T 27 S	R 2 W E/W

Distance and direction from nearest town or city?

Street address of well if located within city? 1120 Azure Ln., Wichita, Ks.

2 WATER WELL OWNER: Jerry Shoemaker
RR#, St. Address, Box # : 10450 W. Maple
City, State, ZIP Code : Wichita, Ks.

Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 90 ft. Bore Hole Diameter 11 in. to ft., and in. to ft.

Well Water to be used as: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well Disposal 12 Other (Specify below)

Well's static water level 20 ft. below land surface measured on 12 month 5 day 80 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 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

Casing Joints: Glued X Clamped Welded Threaded

Blank casing dia 5 in. to 30 ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No .200

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 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 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut .06 9 Drilled holes 10 Other (specify) 11 None (open hole)

Screen-Perforation Dia 5 in. to 90 ft., Dia in. to ft., Dia in to ft.

Screen-Perforated Intervals: From 30 ft. to 50 ft., From ft. to ft.
From 70 ft. to 90 ft., From ft. to ft.

Gravel Pack Intervals: From 14 ft. to 90 ft., From ft. to ft.
From ft. to ft., From ft. to ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grouted Intervals: From 40" ft. to 14 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:
1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 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)

Direction from well East How many feet 10 ? Water Well Disinfected? Yes X No

Was a chemical/bacteriological sample submitted to Department? Yes No X : If yes, date sample was submitted month day year: Pump Installed? Yes No X

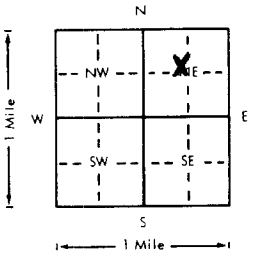
If Yes: Pump Manufacturer's name Model No. HP Volts

Depth of Pump Intake ft. Pumps Capacity rated at gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 12 month 5 day 80 year, 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 2 month 28 day 81 year under the business name of Harp Well & Pump Serv., Inc. by (signature) M. Arnold

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Topsoil			
3	14	Brown Clay			
14	25	Fine Sand			
25	45	Medium to Coarse Sand			
45	51	Gray Clay			
51	68	Fine Sand			
68	88	Medium Sand			
88	90	Gray Clay			

Depth(s) Groundwater Encountered 1 20 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.

OFFICE USE ONLY T 27 R 2 E/W SEC. 13 SE ¼ NW ¼ NE ¼