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| 1 LOCATION OF WATER WELL:<br><b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | FRACTION<br><b>NW 1/4 SW 1/4 SE 1/4</b> | Section Number<br><b>24</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Township Number<br><b>T 27 S</b> | Range Number<br><b>R 2W E/W</b> |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>Lot #30 102 Breezy Point Circle Wichita, Kansas</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                 |
| 2 WATER WELL OWNER: <b>MOORE, Ron</b><br>RR#, ST. ADDRESS, BOX #: <b>102 Breezy Point Circle</b><br>CITY, STATE, ZIP CODE: <b>Wichita, Kansas</b><br>Board of Agriculture, Division of Water Resource<br>Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                 |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br><div style="text-align: center;"> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         | 4 DEPTH OF COMPLETED WELL <b>90</b> ft. ELEVATION:<br>Depth(s) groundwater Encountered 1 ft. 2 ft. 3 ft.<br>WELL'S STATIC WATER LEVEL <b>25</b> FT. BELOW LAND SURFACE MEASURED ON <b>06/28/1994</b><br>Pump test data: Well water was ft. after hours pumping gpm<br>Est. Yield gpm: Well water was ft. after hours pumping gpm<br>Bore Hole Diameter <b>12</b> in. to <b>90</b> ft. and in. to ft.<br>WELL WATER TO BE USED AS:<br>1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well<br>2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)<br>10 Monitoring well<br>Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted<br>Water Well Disinfected? Yes <input checked="" type="checkbox"/> No |                                  |                                 |
| 5 TYPE OF CASING USED:<br>1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped<br>2 PVC 4 ABS 6 Asbestos-Cement 9 Other (Specify below) Welded<br>Blank casing Diameter <b>5</b> in. to <b>70</b> ft., Dia in. to ft., Dia in. to ft.<br>Casing height above land surface <b>12</b> in., weight <b>2.35</b> lbs. / ft. Wall thickness or gauge No. <b>.214</b><br>TYPE OF SCREEN OR PERFORATION MATERIAL:<br>1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement<br>2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 other (specify)<br>12 None used (open hole)<br>SCREEN OR PERFORATION OPENING ARE:<br>1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)<br>2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes<br>10 Other (specify)<br>SCREEN-PERFORATION INTERVALS: from <b>70</b> ft. to <b>90</b> ft., From ft. to ft.<br>GRAVEL PACK INTERVALS: from <b>24</b> ft. to <b>90</b> ft., From ft. to ft.<br>from ft. to ft., From ft. to ft. |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                 |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other<br>Grout Intervals: From <b>4</b> ft. to <b>24</b> ft. From ft. to ft. From ft. to ft.<br>What is the nearest source of possible contamination:<br>1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandon water well<br>2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well<br>3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)<br>13 Insecticide storage <b>None Apparent</b><br>Direction from well? How many feet?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                 |
| LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                 |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | TO                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | FROM                             | TO                              |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 2                                       | topsoil                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                  |                                 |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 70                                      | clay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                 |
| 70                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 90                                      | sand                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                 |
| PLUGGING INTERVALS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                 |
| 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) <b>06/28/1994</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>236</b> This Water Well Record was completed on (mo/day/yr) <b>07/21/94</b><br>Under the business name of <b>Harp Well &amp; Pump Service, Inc</b> by (signature) <i>Jane Frederick</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                 |