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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------|--------------------|----------------------------------------------------------|--|--------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                         |    | Fraction                                                                                                                                                                                                                                              |      | Section Number |                    | Township Number                                          |  | Range Number |  |
| County: <b>SEDGWICK</b>                                                                                                                                                                                                                                           |    | NW ¼ SE ¼ SE ¼                                                                                                                                                                                                                                        |      | 10             |                    | T 28 S                                                   |  | R 1 W E/W    |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>McArthur &amp; Hoover, ¼ West, North side of road. Wichita, Kansas</b>                                                                                      |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| 2 WATER WELL OWNER:                                                                                                                                                                                                                                               |    | <b>Bill Gray Construction, Inc.</b>                                                                                                                                                                                                                   |      |                |                    | <b>Spec. House</b>                                       |  |              |  |
| RR#, St. Address, Box # :                                                                                                                                                                                                                                         |    | <b>204 North Woodchuck</b>                                                                                                                                                                                                                            |      |                |                    | <b>Board of Agriculture, Division of Water Resources</b> |  |              |  |
| City, State, ZIP Code :                                                                                                                                                                                                                                           |    | <b>Wichita, Kansas</b>                                                                                                                                                                                                                                |      |                |                    | <b>Application Number:</b>                               |  |              |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                              |    | 4 DEPTH OF COMPLETED WELL: <b>60</b> ft. ELEVATION:                                                                                                                                                                                                   |      |                |                    |                                                          |  |              |  |
|                                                                                                                                                                                                                                                                   |    | Depth(s) Groundwater Encountered 1. <b>23</b> ft. 2. _____ ft. 3. _____ ft.                                                                                                                                                                           |      |                |                    |                                                          |  |              |  |
|                                                                                                                                                                                                                                                                   |    | WELL'S STATIC WATER LEVEL <b>23</b> ft. below land surface measured on mo/day/yr <b>8-7-87</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: <b>11</b> in. to _____ ft., and _____ in. to _____ ft.                                                                                                                                                                            |      |                |                    |                                                          |  |              |  |
|                                                                                                                                                                                                                                                                   |    | WELL WATER TO BE USED AS:                                                                                                                                                                                                                             |      |                |                    |                                                          |  |              |  |
|                                                                                                                                                                                                                                                                   |    | 1 Domestic <input checked="" type="checkbox"/> 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well<br>2 Irrigation <input checked="" type="checkbox"/> 4 Industrial 7 Lawn and garden only 10 Dewatering 12 Other (Specify below) |      |                |                    |                                                          |  |              |  |
|                                                                                                                                                                                                                                                                   |    | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____                                                                                          |      |                |                    |                                                          |  |              |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                      |    | CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____                                                                                                                                                                                |      |                |                    |                                                          |  |              |  |
| 1 Steel 3 RMP (SR)                                                                                                                                                                                                                                                |    | 5 Wrought iron 8 Concrete tile                                                                                                                                                                                                                        |      |                |                    |                                                          |  |              |  |
| 2 PVC 4 ABS                                                                                                                                                                                                                                                       |    | 6 Asbestos-Cement 9 Other (specify below) Welded _____                                                                                                                                                                                                |      |                |                    |                                                          |  |              |  |
|                                                                                                                                                                                                                                                                   |    | 7 Fiberglass <b>Cer-Mac styrene SDR-26</b> Threaded _____                                                                                                                                                                                             |      |                |                    |                                                          |  |              |  |
| Blank casing diameter <b>5</b> in. to <b>40</b> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.                                                                                                                                                     |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| Casing height above land surface <b>12</b> in., weight <b>1.59</b> lbs./ft. Wall thickness or gauge No. <b>203</b>                                                                                                                                                |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| 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 <b>40</b> ft. to <b>60</b> ft., From _____ ft. to _____ ft.                                                                                                                                                                     |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| GRAVEL PACK INTERVALS: From <b>24</b> ft. to <b>60</b> ft., From _____ ft. to _____ ft.                                                                                                                                                                           |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____                                                                                                                                                                                          |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| Grout Intervals: From <b>4</b> ft. to <b>24</b> 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 <b>None apparent</b>                                                                                                                                                                     |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| Direction from well?                                                                                                                                                                                                                                              |    | How many feet?                                                                                                                                                                                                                                        |      |                |                    |                                                          |  |              |  |
| FROM                                                                                                                                                                                                                                                              | TO | LITHOLOGIC LOG                                                                                                                                                                                                                                        | FROM | TO             | PLUGGING INTERVALS |                                                          |  |              |  |
| 0                                                                                                                                                                                                                                                                 | 3  | Topsoil                                                                                                                                                                                                                                               |      |                |                    |                                                          |  |              |  |
| 3                                                                                                                                                                                                                                                                 | 17 | Clay                                                                                                                                                                                                                                                  |      |                |                    |                                                          |  |              |  |
| 17                                                                                                                                                                                                                                                                | 37 | Fine Sand & Clay                                                                                                                                                                                                                                      |      |                |                    |                                                          |  |              |  |
| 37                                                                                                                                                                                                                                                                | 60 | 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) <b>8-7-87</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>5-31-88</b>                                                                                                                                                 |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |
| under the business name of <b>Harp Well &amp; Pump Service, Inc.</b> by (signature) <i>Mary Arnold</i>                                                                                                                                                            |    |                                                                                                                                                                                                                                                       |      |                |                    |                                                          |  |              |  |