

|                                                                                                                                                                       |  |                        |  |                                                |  |                 |  |              |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|--|------------------------------------------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL                                                                                                                                              |  | Fraction               |  | Section Number                                 |  | Township Number |  | Range Number |  |
| County: SEDGWICK                                                                                                                                                      |  | X NW 1/4 NE 1/4 NW 1/4 |  | 13                                             |  | T 28 S          |  | R 1W E/W     |  |
| Distance and direction from nearest town or city?                                                                                                                     |  |                        |  | Street address of well if located within city? |  |                 |  |              |  |
|                                                                                                                                                                       |  |                        |  | 3415 W. McArthur Wichita, Kansas               |  |                 |  |              |  |
| 2 WATER WELL OWNER: Cecil Akright                                                                                                                                     |  |                        |  |                                                |  |                 |  |              |  |
| RR#, St. Address, Box #: 3415 W. McArthur Board of Agriculture, Division of Water Resources                                                                           |  |                        |  |                                                |  |                 |  |              |  |
| City, State, ZIP Code: Wichita, Kansas Application Number:                                                                                                            |  |                        |  |                                                |  |                 |  |              |  |
| 3 DEPTH OF COMPLETED WELL 50 ft. Bore Hole Diameter 1.1 in. to ft. and in. to ft.                                                                                     |  |                        |  |                                                |  |                 |  |              |  |
| Well Water to be used as:                                                                                                                                             |  |                        |  |                                                |  |                 |  |              |  |
| 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well                                                                                       |  |                        |  |                                                |  |                 |  |              |  |
| 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)                                                                              |  |                        |  |                                                |  |                 |  |              |  |
| 7 Lawn and garden only 10 Observation well                                                                                                                            |  |                        |  |                                                |  |                 |  |              |  |
| Well's static water level 15 ft. below land surface measured on 6 month 18 day 1979 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 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued X Clamped                                                                                      |  |                        |  |                                                |  |                 |  |              |  |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded                                                                                                          |  |                        |  |                                                |  |                 |  |              |  |
| 3 Fiberglass Threaded                                                                                                                                                 |  |                        |  |                                                |  |                 |  |              |  |
| Blank casing dia 5 in. to 35 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 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement                                                                                                  |  |                        |  |                                                |  |                 |  |              |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)                                                                                                   |  |                        |  |                                                |  |                 |  |              |  |
| 12 None used (open hole)                                                                                                                                              |  |                        |  |                                                |  |                 |  |              |  |
| Screen or Perforation Openings Are:                                                                                                                                   |  |                        |  |                                                |  |                 |  |              |  |
| 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                                                                                                       |  |                        |  |                                                |  |                 |  |              |  |
| 7 Torch cut 10 Other (specify)                                                                                                                                        |  |                        |  |                                                |  |                 |  |              |  |
| Screen-Perforation Dia 5 in. to 50 ft. Dia in. to ft. Dia in. to ft.                                                                                                  |  |                        |  |                                                |  |                 |  |              |  |
| Screen-Perforated Intervals: From 35 ft. to 50 ft. From ft. to ft.                                                                                                    |  |                        |  |                                                |  |                 |  |              |  |
| From ft. to ft. From ft. to ft.                                                                                                                                       |  |                        |  |                                                |  |                 |  |              |  |
| Gravel Pack Intervals: From 14 ft. to 50 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.                                                                                                              |  |                        |  |                                                |  |                 |  |              |  |
| What is the nearest source of possible contamination:                                                                                                                 |  |                        |  |                                                |  |                 |  |              |  |
| 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well                                                                                     |  |                        |  |                                                |  |                 |  |              |  |
| 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well                                                                                    |  |                        |  |                                                |  |                 |  |              |  |
| 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)                                                                          |  |                        |  |                                                |  |                 |  |              |  |
| 13 Watertight sewer lines                                                                                                                                             |  |                        |  |                                                |  |                 |  |              |  |
| Direction from well Southwest How many feet 50 ? 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 6 month 8 day 1979 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 7 month 25 day 1979 year under the business                                                                                   |  |                        |  |                                                |  |                 |  |              |  |
| name of Harp Well & Pump Service, Inc. by (signature) M. Arnold                                                                                                       |  |                        |  |                                                |  |                 |  |              |  |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                  |  |                        |  |                                                |  |                 |  |              |  |
| FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG                                                                                                                         |  |                        |  |                                                |  |                 |  |              |  |
| 0 3 Topsoil                                                                                                                                                           |  |                        |  |                                                |  |                 |  |              |  |
| 3 17 Clay                                                                                                                                                             |  |                        |  |                                                |  |                 |  |              |  |
| 17 32 Fine Sand                                                                                                                                                       |  |                        |  |                                                |  |                 |  |              |  |
| 32 50 Medium Sand                                                                                                                                                     |  |                        |  |                                                |  |                 |  |              |  |
| ELEVATION: Flat Ground                                                                                                                                                |  |                        |  |                                                |  |                 |  |              |  |
| X Depth(s) Groundwater Encountered 1 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.                                                                                                                                          |  |                        |  |                                                |  |                 |  |              |  |