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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------|--|----------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                              |  | Fraction             |  | Section Number |  | Township Number |  | Range Number |  |
| County: Sedgwick                                                                                                                                                                                                                                                                                                                                                                                                                       |  | SW 1/4 SE 1/4 SW 1/4 |  | 27             |  | T 28 S          |  | R 1          |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                                                                                        |  |                      |  |                |  |                 |  |              |  |
| Approx. 4 miles east and 5 miles North of Clearwater                                                                                                                                                                                                                                                                                                                                                                                   |  |                      |  |                |  |                 |  |              |  |
| 2 WATER WELL OWNER: Vulcan Materials                                                                                                                                                                                                                                                                                                                                                                                                   |  |                      |  |                |  |                 |  |              |  |
| RR#, St. Address, Box #: Chemicals Division - P.O. B0x 12283                                                                                                                                                                                                                                                                                                                                                                           |  |                      |  |                |  |                 |  |              |  |
| City, State, ZIP Code: Wichita, KS 67277                                                                                                                                                                                                                                                                                                                                                                                               |  |                      |  |                |  |                 |  |              |  |
| Board of Agriculture, Division of Water Resources                                                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                   |  |                      |  |                |  |                 |  |              |  |
| 4 DEPTH OF COMPLETED WELL: 76 ft. ELEVATION: unknown                                                                                                                                                                                                                                                                                                                                                                                   |  |                      |  |                |  |                 |  |              |  |
| Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.                                                                                                                                                                                                                                                                                                                                                                                  |  |                      |  |                |  |                 |  |              |  |
| WELL'S STATIC WATER LEVEL: 56 ft. below land surface measured on mo/day/yr 4/3/86                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| 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: 24 in. to 76 ft., and in. to                                                                                                                                                                                                                                                                                                                                                                                       |  |                      |  |                |  |                 |  |              |  |
| 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 interceptor                                                                                                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| Water Well Disinfected? Yes No                                                                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                           |  |                      |  |                |  |                 |  |              |  |
| 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued.....Clamped.....                                                                                                                                                                                                                                                                                                                                                |  |                      |  |                |  |                 |  |              |  |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded.....                                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| 7 Fiberglass Threaded.....                                                                                                                                                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| Blank casing diameter in. to ft., Dia. in. to ft., Dia. in. to ft.                                                                                                                                                                                                                                                                                                                                                                     |  |                      |  |                |  |                 |  |              |  |
| Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No.                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| 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-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.                                                                                                                                                                                                                                                                                                                                                               |  |                      |  |                |  |                 |  |              |  |
| 6 GROUT MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| 1 Neat cement 2 Cement grout 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                                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)                                                                                                                                                                                                                                                                                                                                       |  |                      |  |                |  |                 |  |              |  |
| 13 Insecticide storage                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| Direction from well? How many feet?                                                                                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                                                                                                          |  |                      |  |                |  |                 |  |              |  |
| PLUGGING REPORT                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                      |  |                |  |                 |  |              |  |
| 4 76 Cement grout                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| NOTE: Excavated and cut off casing four (4) feet below grade - plug w/cement and recompact w/plate compactor                                                                                                                                                                                                                                                                                                                           |  |                      |  |                |  |                 |  |              |  |
| 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) 5/28/87 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/yr) 6/4/87 under the business name of Clarke Well & Equipment, Inc. by (signature) |  |                      |  |                |  |                 |  |              |  |
| 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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.       |  |                      |  |                |  |                 |  |              |  |