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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------|--|----------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                       |  | Fraction             |  | Section Number |  | Township Number |  | Range Number |  |
| County: Sedgwick                                                                                                                                                                                                                                                                                                                                                |  | SW 1/4 SW 1/4 SW 1/4 |  | 11             |  | T 28 S          |  | R 4W E/W     |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| 34314 W. 39th So. Cheney, Kansas 67025                                                                                                                                                                                                                                                                                                                          |  |                      |  |                |  |                 |  |              |  |
| 2 WATER WELL OWNER: Barnes, David                                                                                                                                                                                                                                                                                                                               |  |                      |  |                |  |                 |  |              |  |
| RR#, St. Address, Box # : 4575 So. Sycamore                                                                                                                                                                                                                                                                                                                     |  |                      |  |                |  |                 |  |              |  |
| City, State, ZIP Code : Wichita, Kansas                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 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: 80 ft. ELEVATION:                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.                                                                                                                                                                                                                                                                                                           |  |                      |  |                |  |                 |  |              |  |
| WELL'S STATIC WATER LEVEL 17 ft. below land surface measured on mo/day/yr 6-10-91                                                                                                                                                                                                                                                                               |  |                      |  |                |  |                 |  |              |  |
| 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 11 in. to 80 ft., and in. to ft.                                                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well                                                                                                                                                                                                                                                                            |  |                      |  |                |  |                 |  |              |  |
| 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well                                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| Water Well Disinfected? Yes X No                                                                                                                                                                                                                                                                                                                                |  |                      |  |                |  |                 |  |              |  |
| 5 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                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| 7 Fiberglass SDR-26 Threaded                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| Blank casing diameter 5 in. to 25 ft., Dia in. to ft., Dia in. to ft.                                                                                                                                                                                                                                                                                           |  |                      |  |                |  |                 |  |              |  |
| Casing height above land surface 12 in., weight 2.29 lbs./ft. Wall thickness or gauge No. 214                                                                                                                                                                                                                                                                   |  |                      |  |                |  |                 |  |              |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 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 25 ft. to 80 ft., From ft. to ft.                                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| From ft. to ft., From ft. to ft.                                                                                                                                                                                                                                                                                                                                |  |                      |  |                |  |                 |  |              |  |
| GRAVEL PACK INTERVALS: From 24 ft. to 80 ft., 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 4 ft. to 24 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? Northwest How many feet? 65                                                                                                                                                                                                                                                                                                                |  |                      |  |                |  |                 |  |              |  |
| LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                                                                  |  |                      |  |                |  |                 |  |              |  |
| FROM TO                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 0 3 topsoil                                                                                                                                                                                                                                                                                                                                                     |  |                      |  |                |  |                 |  |              |  |
| 3 11 clay                                                                                                                                                                                                                                                                                                                                                       |  |                      |  |                |  |                 |  |              |  |
| 11 19 1/2 fine sand                                                                                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| 19 1/2 80 grey shale                                                                                                                                                                                                                                                                                                                                            |  |                      |  |                |  |                 |  |              |  |
| PLUGGING INTERVALS                                                                                                                                                                                                                                                                                                                                              |  |                      |  |                |  |                 |  |              |  |
| FROM TO                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 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) 6-10-91 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 (mo/day/yr) 10-6-91                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| under the business name of Harp Well and Pump Service, Inc. by (signature) Mary Arnold                                                                                                                                                                                                                                                                          |  |                      |  |                |  |                 |  |              |  |
| 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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records. |  |                      |  |                |  |                 |  |              |  |