|                                                                                                                                                                                          | WELL E                                                                      | _                              | WWC-5          |                      |        | sion of Water                    | 20190169                                     | Well ID Smith 3-8 |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------|----------------|----------------------|--------|----------------------------------|----------------------------------------------|-------------------|--|
|                                                                                                                                                                                          |                                                                             |                                | e in Well Use  |                      |        | urces App. No                    |                                              |                   |  |
| 1 LOCATION OF WATER WELL:<br>County: Ford                                                                                                                                                |                                                                             |                                | Fraction S     |                      |        |                                  |                                              | R 22 DE W         |  |
|                                                                                                                                                                                          |                                                                             |                                | L              |                      |        |                                  |                                              |                   |  |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          | Address: 200 West Douglas Sto 725                                           |                                |                |                      |        |                                  |                                              |                   |  |
| 1                                                                                                                                                                                        | Address: 200 West Douglas, Ste 725  Address: 1 North, 1/2 East of Kingsdown |                                |                |                      |        |                                  |                                              |                   |  |
| City: Wichita State: KS ZIP: 67202                                                                                                                                                       |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 3 LOCAT                                                                                                                                                                                  |                                                                             |                                |                |                      | 000 0  |                                  | 27 54144                                     |                   |  |
|                                                                                                                                                                                          | WITH "Y" IN 4 DEPTH OF COMPLETED WELL:4XV                                   |                                |                |                      |        |                                  | ft. 5 Latitude: 37.54144 (decimal degrees)   |                   |  |
|                                                                                                                                                                                          | SECTION BOY. Depth(s) Groundwater Encountered: 1)                           |                                |                |                      |        |                                  | Longitude: 99.75018 (decimal degrees)        |                   |  |
|                                                                                                                                                                                          | $\mathbf{x}$ 2) tt. 3) tt., or 4) $\mathbf{\Box}$ Dry we                    |                                |                |                      |        |                                  | Horizontal Datum: WGS 84 NAD 83 NAD 27       |                   |  |
|                                                                                                                                                                                          | WELL'S STATIC WATER LEVEL:!49 ft                                            |                                |                |                      |        | Source for Latitude/Longitude:   |                                              |                   |  |
| 1 -1                                                                                                                                                                                     | below land surface, measured on (mo-day-yr)5-3                              |                                |                |                      |        |                                  |                                              |                   |  |
| NW                                                                                                                                                                                       | above land surface, measured on (mo-day-yr)                                 |                                |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          | Pump test data: Well water was ft.                                          |                                |                |                      |        | ☐ Land Survey ☐ Topographic Map  |                                              |                   |  |
| W                                                                                                                                                                                        | E after hours pumping gpm Well water was ft.                                |                                |                |                      |        | ☐ Online Mapper:                 |                                              |                   |  |
| sw                                                                                                                                                                                       | SW SE after hours pumping g                                                 |                                |                |                      |        |                                  |                                              |                   |  |
| Fstimated Vield                                                                                                                                                                          |                                                                             |                                | onm            |                      |        | 6 Elevation:ft. Ground Level TOC |                                              |                   |  |
|                                                                                                                                                                                          | S Bore Hole Diameter:                                                       |                                |                | 10 in to 230 ft. and |        |                                  | Source:   Land Survey GPS Topographic Map    |                   |  |
| 1 mile                                                                                                                                                                                   |                                                                             |                                | in. to ft.     |                      |        | ☐ Other                          |                                              |                   |  |
| 7 WELL WATER TO BE USED AS:                                                                                                                                                              |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 1. Domestic: 5. Public Water Supply: well ID                                                                                                                                             |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          | Household 6. Dewatering: how many wells?                                    |                                |                |                      |        |                                  | 11. Test Hole: well ID                       |                   |  |
|                                                                                                                                                                                          | Lawn & Garden 7. Aquifer Recharge: well ID                                  |                                |                |                      |        |                                  |                                              |                   |  |
| Livesto                                                                                                                                                                                  |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 2.   Irrigation                                                                                                                                                                          |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 3. ☐ Feedlot                                                                                                                                                                             |                                                                             |                                |                |                      |        |                                  | b) Open Loop Surface Discharge Inj. of Water |                   |  |
| 4. Industri                                                                                                                                                                              |                                                                             | Injection 13. Other (specify): |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Water well disinfected? Yes No                                                                                                                                                           |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other                                                                                                                                             |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Casing diameter 5 in to 230 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft.  Casing height above land surface 18 in Weight SDR-21 lbs./ft. Wall thickness or gauge No.   |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Casing neight above land surface                                                                                                                                                         |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                  |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)                                                                                                                           |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)                                                                                                                       |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                      |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)                                                                                              |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped ■ Saw Cut □ None (Open Hole)                                                                                                             |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| SCREEN-PERFORATED INTERVALS: From                                                                                                                                                        |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| GRAVEL PACK INTERVALS: From 230 ft. to 20 ft., From ft. to ft., From ft. to ft.                                                                                                          |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other                                                                                                                               |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Grout Intervals: From                                                                                                                                                                    |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Nearest source of possible contamination:                                                                                                                                                |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage                                                                                                         |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Sewer                                                                                                                                                                                    |                                                                             | Cess Pool                      | □ Sew          | vage Lago            |        | Fuel Storage                     | _                                            | ed Water Well     |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well                                                                                               |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Direction from well? ft.                                                                                                                                                                 |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 10 FROM                                                                                                                                                                                  | TO                                                                          | LITHOLO                        |                | TOIL WELL            | FROM   |                                  |                                              | LUGGING INTERVALS |  |
| 0                                                                                                                                                                                        | 2                                                                           | Top soil                       | arc roa        |                      | I KOM  | - 10                             | LITTO, LOG (WIII.) OF F                      | ECOUNT INTERVALS  |  |
| 2                                                                                                                                                                                        | 130                                                                         |                                |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          |                                                                             | Tan clay                       | rovol otropic  |                      |        |                                  |                                              |                   |  |
| 130                                                                                                                                                                                      | 155                                                                         | Tan clay, caliche, & g         | i avei streaks |                      |        |                                  | · · · · · · · · · · · · · · · · · · ·        |                   |  |
| 155                                                                                                                                                                                      | 226                                                                         | Gravel- med, tight             |                |                      |        |                                  |                                              |                   |  |
| 226                                                                                                                                                                                      | 230                                                                         | Gray shale                     |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          |                                                                             |                                |                |                      | Notes: |                                  |                                              |                   |  |
|                                                                                                                                                                                          |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
|                                                                                                                                                                                          |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged                                                                                 |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| under my jurisdiction and was completed on (mo-day-year)                                                                                                                                 |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo-day-year)9.1.1.12                                                                               |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| under the business name of Rosencrantz- Bemis Ent Inc                                                                                                                                    |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,                                   |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.                                         |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |
| Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015                                                                                                    |                                                                             |                                |                |                      |        |                                  |                                              |                   |  |