

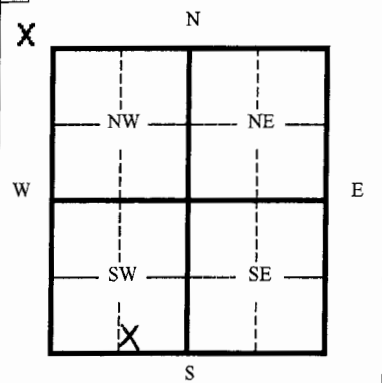
1 LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
County: Wyandotte SW 1/4 SE 1/4 SW 1/4	36	10S	24E

Distance and direction from nearest town or city street address of well if located within city?

FINA #9477, 4812 Parallel Parkway, Kansas City

2 WATER WELL OWNER: Total Petrochemicals USA	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # 1201 Louisiana Street, Suite 180	
City, State, ZIP Code : Houston, Texas 77002	

3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL 15 ft.												
WELL'S STATIC WATER LEVEL Unknown ft.												
WELL WAS USED AS:												
<table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><input checked="" type="radio"/> 10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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4 Industrial	8 Air Conditioning	12 Other										
Was a chemical/bacteriological sample submitted to Department? Yes ___ No <input checked="" type="checkbox"/>												
If yes, mo/day/yr sample was submitted _____												
Water Well Disinfected: Yes ___ No <input checked="" type="checkbox"/>												

5 TYPE OF BLANK CASING USED:										
<table border="0"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (specify below)</td> </tr> <tr> <td><input checked="" type="radio"/> 2 PVC</td> <td>4 ABC</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	<input checked="" type="radio"/> 2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
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Blank casing diameter 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No ___ If yes, how much Overdrilled entire casing/screen										
Casing height above or below land surface 0 in.										

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other
Grout Plug Intervals From 1 ft. to 15 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	<input checked="" type="radio"/> 11 Fuel storage	16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage	
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	
4 Lateral lines	9 Feedyard	14 Abandoned water well	
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well	

Direction from well? **West** How many feet? **45**

FROM	TO	CODE	PLUGGING MATERIALS
0 ft	1 ft		Compacted silt/clay
1 ft	15 ft		3/8" diameter bentonite chips

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 7/26/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 616 This Water Well Record was completed on (mo/day/yr) 8/15/06 under the business name of Thiele Geotech, Inc.
by (signature) <i>D. J. Dal...</i>

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.