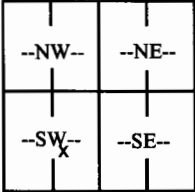


1 LOCATION OF WATER WELL: County: Shawnee	Fraction NW 1/4 SE 1/4 SW 1/4	Section Number 9	Township Number T 11 S	Range Number R 15 E W
Distance and direction from nearest town or city street address of well if located within city? Approximately 3 miles north of Topeka		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 39.103526 Longitude: -95.757119 Elevation: Unknown Datum: NAD83 Data Collection Method: WAAS GPS Unit		
2 WATER WELL OWNER: Consolidated RWD #4 of Shawnee Co. RR#, St. Address, Box # : 3333 NW Button Rd. City, State, ZIP Code : Topeka, KS 66675				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">4 DEPTH OF COMPLETED WELL 55 ft.</td> <td style="width:50%;"></td> </tr> <tr> <td>Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.</td> <td></td> </tr> <tr> <td>WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr 10-09-08</td> <td></td> </tr> <tr> <td>Pump test data: Well water was Not checked ft. after _____ hours pumping _____ gpm</td> <td></td> </tr> <tr> <td>Est. Yield Unknown gpm: Well water was _____ ft. after _____ hours pumping _____ gpm</td> <td></td> </tr> <tr> <td>WELL WATER TO BE USED AS: (5) Public water supply 8 Air conditioning 11 Injection well</td> <td></td> </tr> <tr> <td>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)</td> <td></td> </tr> <tr> <td>2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well</td> <td></td> </tr> <tr> <td>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr _____</td> <td></td> </tr> <tr> <td>Sample was submitted _____ Water well disinfected? Yes <input checked="" type="checkbox"/> No _____</td> <td></td> </tr> </table>	4 DEPTH OF COMPLETED WELL 55 ft.		Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.		WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr 10-09-08		Pump test data: Well water was Not checked ft. after _____ hours pumping _____ gpm		Est. Yield Unknown gpm: Well water was _____ ft. after _____ hours pumping _____ gpm		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 Domestic (lawn & garden) 10 Monitoring well		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 <input checked="" type="checkbox"/> No _____	
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5 TYPE OF CASING USED: (1) Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 2 PVC 4 ABS 7 Fiberglass	5 Wrought Iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____ Welded <input checked="" type="checkbox"/> Threaded _____
Blank casing diameter 14 in. to 47 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.	Casing height above land surface 12 in., weight 54.74 lbs./ft. Wall thickness or gauge No. .375	
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel (3) Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) _____ 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE: (1) Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) _____		
SCREEN-PERFORATED INTERVALS: From 47 ft. to 54 ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.		
GRAVEL PACK INTERVALS: From 30 ft. to 55 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 5 ft. to 25 ft., From 25 ft. to 30 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 13 Insecticide Storage (16) Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well None known 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well	
Direction from well? _____ How many feet? _____	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	18	Clay, dark gray			
18	31	Sand, fine, medium			
31	36	Clay, dark gray			
36	42	Sand and gravel, fine, medium			
42	43	Clay, dark gray			
43	54	Sand and gravel, fine, medium, some coarse			
54	55	Shale, gray			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1) constructed** (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) **10-09-08** 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/year) **10-14-08**
 Under the business name of **Clarke Well & Equipment, Inc.** by (signature) *[Signature]*