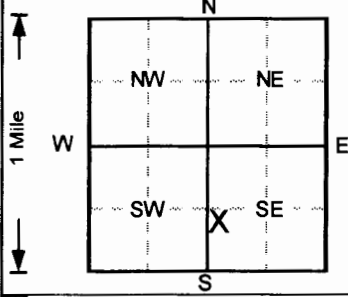


1 LOCATION OF WATER WELL: County: Shawnee	Fraction NW ¼ SW ¼ SE ¼	Section Number 17	Township Number T 11 S	Range Number R 16 (E/W)
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Distance and direction from nearest town or city street address of well if located within city?
101 NE US 24, Topeka

2 WATER WELL OWNER: **Greenfield Environmental Multistate Trust LLC**
 RR#, St. Address, Box # : **1920 232nd Place SE**
 City, State, ZIP Code : **Bothell, WA 98021**
 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: **35** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. **10.5** ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr
 Pump test data: Well water was **NA** ft. after _____ hours pumping _____ gpm
 Est. Yield **NA** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **8** in. to **35** 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 **Air sparge**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No
 Water Well Disinfected? Yes _____ No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
2 PVC 4 ABS 7 Fiberglass Threaded
 Blank casing diameter **2** in. to **33** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. **Sch. 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL: **7 PVC** 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot **3 Mill slot** 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **33** ft. to **35** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **31** ft. to **35** 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 Concrete** _____
 Grout intervals: From **0** ft. to **1** ft., From **1** ft. to **31** ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy **11 Fuel storage** 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) _____
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Clay,			
5	6.3	Clay, Dark Brown			
6.3	10.5	Silt, some clay, Lt. Gray w/black stn			
10.5	12	Silt, clayey, Lt. Gray			
12	18	Silt, Lt. Brown			
18	19	Silt, grdg to sand, Lt. Brown			
19	21.25	Sand, m, Tan			
21.25	23	Silt w/some clay, Dark Brown			
23	25	Silt, Lt. Gray			
25	26.5	Sand, m, Brown			
26.5	28	Sand to Silt, vf, Brown			
28	35	No Returns,			
					B-4/Sparge

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) **11/10/2015** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/yr) **2/1/16**
 under the business name of **GeoCore, Inc.** by (signature) *Dale Holt*

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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.