

|   |                          |                      |                |                 |              |
|---|--------------------------|----------------------|----------------|-----------------|--------------|
| 1 | LOCATION OF WATER WELL:  | Fraction             | Section Number | Township Number | Range Number |
|   | County: <u>Wyandotte</u> | <u>SE 1/4 NW 1/4</u> | <u>31</u>      | <u>11-S</u>     | <u>25-E</u>  |

Distance and direction from nearest town or city street address of well if located within city? KCK  
NW Corner of Shawnee Dr. & South 42nd St MW# 2

|   |  |   |
|---|--|---|
| 2 | WATER WELL OWNER: <u>Coastal Mkt Inc</u>                   | Board of Agriculture, Division of Water Resources |
|   | RR #, St. Address, Box #: <u>NINE GISSAWAY PLAZA #2810</u> | Application Number:                               |
|   | City, State, ZIP Code: <u>HOUSTON TX 77046</u>             |   |

|  |  |   |                            |            |                       |              |              |                          |   |           |                            |                   |              |                    |                |
|--|--|---|----------------------------|------------|-----------------------|--------------|--------------|--------------------------|---|-----------|----------------------------|-------------------|--------------|--------------------|----------------|
| 3  | MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4   | DEPTH OF WELL <u>12</u> ft |            |                       |              |              |                          |   |           |                            |                   |              |                    |                |
|  |  | WELL'S STATIC WATER LEVEL _____ 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 Domestic (Lawn &amp; Garden)</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 Domestic (Lawn & Garden) | 11 Injection Well | 4 Industrial | 8 Air Conditioning | 12 Other _____ |
| 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 Domestic (Lawn & Garden)                       | 11 Injection Well   |                            |            |                       |              |              |                          |   |           |                            |                   |              |                    |                |
| 4 Industrial   | 8 Air Conditioning                               | 12 Other _____  |                            |            |                       |              |              |                          |   |           |                            |                   |              |                    |                |
| Was a chemical / bacteriological sample submitted to Department? Yes _____ No <u>—</u> |  |   |                            |            |                       |              |              |                          |   |           |                            |                   |              |                    |                |
| If yes, mo/day/yr sample was submitted _____   |  |   |                            |            |                       |              |              |                          |   |           |                            |                   |              |                    |                |
| Water Well Disinfected: Yes _____ No <u>—</u>  |  |   |                            |            |                       |              |              |                          |   |           |                            |                   |              |                    |                |

|  |   |                   |                 |                         |              |                         |  |       |                   |                 |  |
|--|---|-------------------|-----------------|-------------------------|--------------|-------------------------|--|-------|-------------------|-----------------|--|
| 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 ABS</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 ABS | 6 Asbestos-Cement | 8 Concrete Tile |  |
| 1 Steel                                | 3 RMP (SR)  | 5 Wrought         | 7 Fiberglass    | 9 Other (Specify below) |              |                         |  |       |                   |                 |  |
| <input checked="" type="radio"/> 2 PVC | 4 ABS   | 6 Asbestos-Cement | 8 Concrete Tile |                         |              |                         |  |       |                   |                 |  |
|  | Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>—</u> No _____ If yes, how much <u>5' 4" sep.</u>  |                   |                 |                         |              |                         |  |       |                   |                 |  |
|  | Casing height above or below land surface <u>3</u> in.  |                   |                 |                         |              |                         |  |       |                   |                 |  |

|   |  |                             |                                     |  |                           |               |               |                 |                          |               |             |                       |  |   |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
|---|--|-----------------------------|-------------------------------------|--|---------------------------|---------------|---------------|-----------------|--------------------------|---------------|-------------|-----------------------|--|---|-----------------|------------------------|--|-----------------|------------|-------------------------|--|-------------|-------------------|----------------------|--|
| 6   | GROUT PLUG MATERIAL:   | 1 Neat cement               | 2 Cement grout                      | <input checked="" type="radio"/> 3 Bentonite | 4 Other <u>Quickcrete</u> |               |               |                 |                          |               |             |                       |  |   |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
|   | GROUT PLUG INTERVALS:  | From _____ ft. to _____ ft. | From <u>12</u> ft. to <u>15</u> ft. | From <u>5</u> to <u>0</u> ft.                |                           |               |               |                 |                          |               |             |                       |  |   |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
|   | What is the nearest source of possible contamination:  |                             |                                     |  |                           |               |               |                 |                          |               |             |                       |  |   |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
|   | <table border="0"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td><input checked="" type="radio"/> 3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table> |                             |                                     |  |                           | 1 Septic tank | 6 Seepage pit | 11 Fuel storage | 16 Other (specify below) | 2 Sewer lines | 7 Pit privy | 12 Fertilizer storage |  | <input checked="" type="radio"/> 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 |  |
| 1 Septic tank   | 6 Seepage pit  | 11 Fuel storage             | 16 Other (specify below)            |  |                           |               |               |                 |                          |               |             |                       |  |   |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
| 2 Sewer lines   | 7 Pit privy  | 12 Fertilizer storage       |                                     |  |                           |               |               |                 |                          |               |             |                       |  |   |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
| <input checked="" type="radio"/> 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? <u>South</u> How many feet? <u>15'</u>  |                             |                                     |  |                           |               |               |                 |                          |               |             |                       |  |   |                 |                        |  |                 |            |                         |  |             |                   |                      |  |

| FROM      | TO        | PLUGGING MATERIALS                  |
|-----------|-----------|-------------------------------------|
| <u>12</u> | <u>15</u> | <u>Bentonite Granular Bentonite</u> |
| <u>15</u> | <u>0</u>  | <u>Quickcrete</u>                   |
|           |           |                                     |
|           |           |                                     |
|           |           |                                     |
|           |           |                                     |
|           |           |                                     |

|   |   |
|---|---|
| 7 | CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>7-2-01</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>575</u> This Water Well Record was completed on (mo/day/year) <u>7-2-01</u> |
|   | under the business name of <u>Funk K&amp;K Drilling Service Inc.</u>  |
|   | by (signature) <u>[Signature]</u>   |

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: 785/296-3565. Send one to Water Well Owner and retain one for your records.