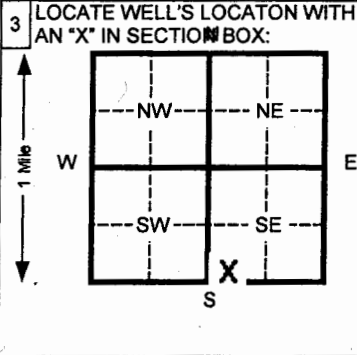


1 LOCATION OF WATER WELL: Fraction **SW ¼ SW ¼ SE ¼** Section Number **3** Township Number **T 11 S** Range Number **R 5** EW
 County: **Geary**

Distance and direction from nearest town or city street address of well if located within city? **MW-10**
Trailer park 100 feet northwest of former gas station at 370 Grant Avenue, Junction City, Kansas.
 Latitude: **N 39° 02.672'**, Longitude: **W 96° 49.361'**

2 WATER WELL OWNER: **ATOFINA Petrochemicals, Inc.**
 RR#, St. Address, Box #: **P.O. Box 674411** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Houston, Texas 77267-4411** Application Number:



4 DEPTH OF COMPLETED WELL **28.5** ft. ELEVATION: **Unknown**
 Depth(s) Groundwater Encountered 1 **23-24** ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL **Unknown** ft. below land surface measured on mo/day/yr _____
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **< 50** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **8** in. to **28.5** ft. and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 **Monitoring well**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No **X**

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 **X**
 Blank casing diameter **2** in. to **20** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **- 6.0** in., weight **0.682** lbs./ft. Wall thickness or gauge No. **0.154 in.**

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 **18.5** ft. to **28.5** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **16.5** ft. to **28.5** 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 **1** ft. to **16.5** ft. From _____ ft. to _____ 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 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 **Fuel storage** 15 Oil well/ Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage

Direction from well? **Southwest** How many feet? **Approximately 100 feet**

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3.5	03	Black, silty clay w/ debris			
3.5	4.5	05	Black to brown silty sand			
4.5	10	02	Light tan, clayey silt; silt loam from 7.5 - 10 ft.			
10	20	02	Light tan to brown, sandy silt w/ fine grained sand and a clayey silt lense from 13.5 to 14 ft.			
20	28.5	02	Gray, clayey silt to silty clay			

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/yr) **6/30/04** 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) **7/13/04** under the business name of **Thiele Geotech, Inc.** by (signature) **D-JAR**

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.

OFFICE USE ONLY

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