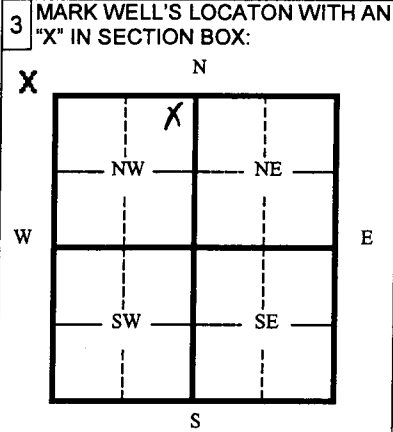


1 LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
County: <b>Geary</b> NE ¼ NE ¼ NW ¼	<b>1</b>	<b>12S</b>	<b>5E</b>

Distance and direction from nearest town or city street address of well if located within city?  
**370 Grant Avenue, Junction City**

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



4 DEPTH OF WELL **46** ft.  
 WELL'S STATIC WATER LEVEL **Unknown** ft.  
 WELL WAS USED AS:  
 1 Domestic                      5 Public Water Supply                      9 Dewatering  
 2 Irrigation                      6 Oil Field Water Supply                      10 **Monitoring Well**  
 3 Feedlot                          7 Lawn and Garden (domestic)                      11 Injection Well  
 4 Industrial                      8 Air Conditioning                          12 Other

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:  
 1 Steel                      3 RMP (SR)                      5 Wrought                      7 Fiberglass                      9 Other (specify below)  
 2 **PVC**                      4 ABC                      6 Asbestos-Cement                      8 Concrete Tile

Blank casing diameter **5** in. Was casing pulled? Yes **X** No \_\_\_\_\_ If yes, how much **46 ft. (including screen)**  
 Casing height above or below land surface **0** in.

6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout    **3 Bentonite**    4 Other

Grout Plug Intervals From **0.5** ft. to **46** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:  
 1 Septic tank                      6 Seepage pit                      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? **110**

FROM	TO	CODE	PLUGGING MATERIALS
<b>0</b>	<b>0.5</b>		<b>Compacted clay or concrete</b>
<b>0.5</b>	<b>46</b>		<b>Bentonite</b>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **11/8/04** 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) **12/29/04** under the business name of **Thiele Geotech, Inc.**  
 by (signature) *D. J. Aul*

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