

BORING LOG

Boring Name I-1
Project No. BR0097A **Geologist** C. Ross and C. Sullivan
Client Invensys **Drilling Method** Hollow-stem auger
Project Name Invensys Kansas **Borehole Dia.** 13" OD HSA
Location Abilene, Kansas **Northing** 38.921973 N
Drilling Co. Geocore **Easting** 97.234878 W
Completion 4/29/2004 **Kansas St. Plane** N215183.1', E1529927.4'

Top of Vault Elev 1170.64 (NAD83) ft
Top of Casing 1166.15 (NAD83) ft
Well Diameter 6 in
Depth to Water 26.1 ft
Date 4/29/2004

Checked By: cre

Depth (ft)	Water Level during drilling	Stratigraphy	Lithologic Description	USCS Classification	Sample ID	Blow Count (blows/6-inch)	Recovery (inch)	PID* (ppm)	Comments on Sample	Annulus	Well	Well & Annulus Materials	Depth (ft)
			ORGANIC SOIL	Pt					Black and brown organic soil			4' diam vault	
5			SAND	SP					Light orangish brown fine and medium sand, uniform			toc Sch 80 PVC flange	5
10			Silty SAND	SM					Silty sand, brown			Cement-Bentonite Grout (5-28.5 ft) 6-inch PVC riser (4.5-31.5 ft)	10
15			Sandy SILT	ML					Dark brown slightly plastic sandy silt				15
20													20
25													25
30												bentonite chips (30.5 - 28.5 ft)	30
35													35
40												Sand Pack (30.5 - 47 ft)	40
45												10-slot SS screen (31.5 - 46.5 ft)	45
												Female bottom cap at 46.5 ft	

NOTE: Soil types were identified from cuttings at the ground surface during augering. Rock types were identified from core samples.

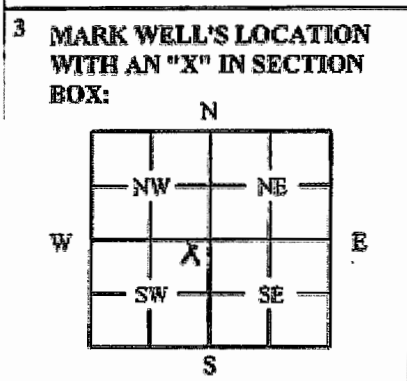
1 LOCATION OF WATER WELL: County: <u>Dickinson</u>	Fraction <u>NW 1/4 NE 1/4 NE 1/4 SW 1/4</u>	Section Number <u>17</u>	Township Number <u>13 S</u>	Range Number <u>2</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance and direction from nearest town or intersection. If at owner's address, check here <input type="checkbox"/> <u>550 N. Washington, Abilene</u>	Global Positioning Systems (GPS) Information: Latitude: _____ (in decimal degrees) Longitude: _____ (in decimal degrees) Elevation: _____ Datum: <input type="checkbox"/> WGS84 <input type="checkbox"/> NAD83 <input type="checkbox"/> NAD27 Collection Method: _____
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2 WATER WELL OWNER: GPI Interiors Inc
 RR#, St. Address, Box # 33 Commerce
 City, State ZIP Code Foxboro, MO 64441

CORRECTION

This well is active, so its status in the KGS database should be changed from plugged to active.



<input type="checkbox"/> Domestic	<input type="checkbox"/> Public water supply	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Old Field Water Supply	<input checked="" type="checkbox"/> Digital Merit by Carl R. Elder
<input type="checkbox"/> Feeding	<input type="checkbox"/> Domestic (Farm Ground)	<input type="checkbox"/> Digital Merit by Carl R. Elder
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Digital Merit by Carl R. Elder

Name: Carl R. Elder
 Digital Merit by Carl R. Elder
 1000 S. Jackson Blvd., 2nd Floor, Acton, MA 01701
 email: carl@geosyntec.com, c=US
 Date: 2015.09.24 13:35:18 -04'00'

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other: _____
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos/Cement	<input type="checkbox"/> Concrete Tile	

Blank casing diameter: 2 in. Was casing pulled? Yes No If Yes, how much 3'
 Casing height above or below land surface: _____ in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other: _____

Grout Plug intervals: From 3 ft. To 30.75 ft. From _____ ft. To _____ ft. From _____ ft. To _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Scepage pit	<input type="checkbox"/> Fuel storage	<input type="checkbox"/> Other (specify below): _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well: _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet: _____

FROM	TO	PLUGGING MATERIAL	FROM	TO	PLUGGING MATERIAL
0	3	Native soil (8")			
3	30.75	Bentonite (2")			
					I-1

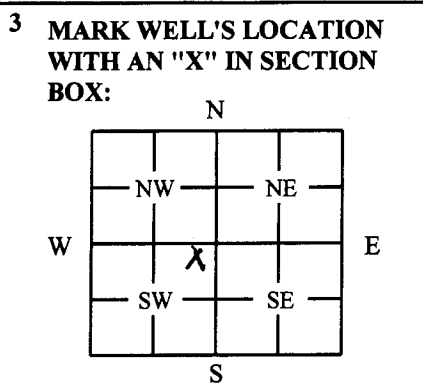
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527. This Water Well Record was completed on (mo/day/year) 8/14/2013 under the business name of GeoCore Inc. by (signature) Don Huff.

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

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2 WATER WELL OWNER: <u>GPI Interim Inc.</u> RR#, St. Address, Box # <u>33 Commercial St.</u> City, State ZIP Code <u>Foxboro, MA 02035</u>	
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4 DEPTH OF WELL: 30.75 ft.
WELL'S STATIC WATER LEVEL: _____ ft.
WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Old Field Water Supply	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn/Garden)	<input checked="" type="checkbox"/> Injection Well
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____

Was a chemical/bacteriological sample submitted to Department? Yes No

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