| WATER WELL PLUGGING RECORD Form WW   | /C-5 KSA 82a-1212 ID NO.  |
|--|---|
| 1 LOCATION OF WATER WELL: Fraction County: Dickinson NE 1/4 NW 1/4 NE  | Section Number Township Number Range Number 1/4 SW 1/4 17 13 S 2 E W  |
| Street/Rural Address of Well Location; if unknown, distance a direction from nearest town or intersection. If at owner's address check here  | Latitude: (in decimal degrees) Longtitude: (in decimal degrees) Elevation:  |
| 550 N. Washington, Abilene   | Datum: WGS84 NAD83 NAD27  Collection Method:  |
| WATER WELL OWNER: GPI Interim Inc. RR#, St. Address, Box # 33 Commercial St. City, State ZIP Code Foxboro, MA 020305   | ☐ GPS unit Make/Model: ☐ Digital Map/Photo ☐ Topographic Map ☐ Land Survey Est. Accuracy: ☐ <3 m ☐ 3-5 m ☐ 5-15 ☐ >15 |
| MARK WELL'S LOCATION   WITH AN "X" IN SECTION   BOX:   WELL'S STATIC WATER LEVEL:   ft.   ft.   WELL WAS USED AS:   Domestic   Public Water Supply   Dewatering   Irrigation   Old Field Water Supply   Monitoring   Domestic   Public Water Supply   Monitoring   Domestic   Domestic (Lawn/Garden)   Injection Well   Injection Well   Injection Well   Injection Well   Mas a chemical/bacteriological sample submitted to Department?   Yes   No   No   No   No   No   No   No   N |   |
| ☐ Septic tank       ☐ Seepage pit       ☐ Fuel storage       ☐ Other (specify below):         ☐ Sewer lines       ☐ Pit privy       ☐ Fertilizer storage   |   |
| □ Watertight sewer lines       □ Sewage lagoon       □ Insecticide storage         □ Lateral lines       □ Feedyard       □ Abandoned water well       □ Direction from well:         □ Cess pool       □ Livestock pens       □ Oil well/Gas well       How many feet:  |   |
| FROM TO PLUGGING MATERIAL  | FROM TO PLUGGING MATERIAL   |
| 0 3 Native soil (8") 3 43.3 Bentonite (2")   |   |
|  | MW-G  |
|  |   |
|  |   |
|  |   |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)9/27/2013 _ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No527. This Water Well Record was completed on (mo/day/year)10/25/2013 _ under the business name of GeoCore Inc by (signature) Lol   |   |
| 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.  |   |