

|                                                     |                                         |                             |                               |                            |
|-----------------------------------------------------|-----------------------------------------|-----------------------------|-------------------------------|----------------------------|
| 1 LOCATION OF WATER WELL:<br>County: <u>JOHNSON</u> | Fraction<br><u>SW 1/4 NW 1/4 NW 1/4</u> | Section Number<br><u>17</u> | Township Number<br><u>13S</u> | Range Number<br><u>22E</u> |
|-----------------------------------------------------|-----------------------------------------|-----------------------------|-------------------------------|----------------------------|

Distance and direction from nearest town or city street address of well if located within city?  
35425 W 103 DESOTO KS 66018

|                                                                                                                                               |                                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| 2 WATER WELL OWNER: <u>KOCH SULFUR PLANT</u><br>RR#, St. Address, Box #: <u>35425 W 103</u><br>City, State, ZIP Code : <u>DESOTO KS 66018</u> | Board of Agriculture, Division of Water Resources<br>Application Number: |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                           |     |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------|-----|--|---|-----|-----|---|-----|--|--|-----|---|--|--|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------|--------------|--------------|--------------------------|---------------------------|-----------|------------------------|-------------------|--------------|--------------------|---------------|
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br>N<br><div style="text-align: center;"> <table border="1" style="width: 100px; height: 100px; border-collapse: collapse; margin: auto;"> <tr><td style="width: 25px; height: 25px; text-align: center;">X</td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="text-align: center;">W</td><td style="text-align: center;">N W</td><td style="text-align: center;">N E</td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">S W</td><td></td><td></td><td style="text-align: center;">S E</td></tr> <tr><td style="text-align: center;">S</td><td></td><td></td><td></td></tr> </table> </div> | X                        |                           |     |  | W | N W | N E | E | S W |  |  | S E | S |  |  |  | 4 DEPTH OF WELL <u>158</u> .....ft.<br>WELL'S STATIC WATER LEVEL <u>22</u> .....ft.<br>WELL WAS USED AS:<br><table style="width: 100%;"> <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><u>10 Monitoring Well</u></td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden Only</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other.....</td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes....No....<br/>         If yes, mo/day/yr sample was submitted.....<br/>         Water Well Disinfected: Yes..... No.....</p> | 1 Domestic | 5 Public Water Supply | 9 Dewatering | 2 Irrigation | 6 Oil Field Water Supply | <u>10 Monitoring Well</u> | 3 Feedlot | 7 Lawn and Garden Only | 11 Injection Well | 4 Industrial | 8 Air Conditioning | 12 Other..... |
| X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                           |     |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
| W                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | N W                      | N E                       | E   |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
| S W                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                           | S E |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
| S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                           |     |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
| 1 Domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5 Public Water Supply    | 9 Dewatering              |     |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
| 2 Irrigation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 6 Oil Field Water Supply | <u>10 Monitoring Well</u> |     |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
| 3 Feedlot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 7 Lawn and Garden Only   | 11 Injection Well         |     |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |
| 4 Industrial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 8 Air Conditioning       | 12 Other.....             |     |  |   |     |     |   |     |  |  |     |   |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                       |              |              |                          |                           |           |                        |                   |              |                    |               |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------|--------------------------|-------------------------|-------------------------|--------------|-------|-------------------|-----------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------|-----------------|--------------------------|---------------|-------------|-----------------------|---------------------|--------------------------|-----------------|------------------------|--|-----------------|------------|-------------------------|--|-------------|-------------------|----------------------|--|
| 5 TYPE OF BLANK CASING USED:<br><table style="width: 100%;"> <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><u>2 PVC</u></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> <p>Blank casing diameter <u>4</u>.....in. <u>DRILLED OUT</u> was casing pulled? Yes <u>X</u>... No..... If yes, how much <u>A.L.L.</u><br/>         Casing height above or below land surface <u>0</u>.....in.</p> | 1 Steel           | 3 RMP (SR)              | 5 Wrought                | 7 Fiberglass            | 9 Other (specify below) | <u>2 PVC</u> | 4 ABS | 6 Asbestos-Cement | 8 Concrete Tile |  | 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other.....<br>Grout Plug Intervals: From <u>3</u> ..ft. to <u>158</u> ft., From.....ft. to .....ft., From..... to.....ft.<br>What is the nearest source of possible contamination:<br><table style="width: 100%;"> <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><u>SULFUR PLANT</u></td> </tr> <tr> <td>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> <p>Direction from well? <u>N.E.</u>..... How many feet? <u>300</u>.....</p> | 1 Septic tank | 6 Seepage pit | 11 Fuel storage | 16 Other (specify below) | 2 Sewer lines | 7 Pit privy | 12 Fertilizer storage | <u>SULFUR PLANT</u> | 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 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 3 RMP (SR)        | 5 Wrought               | 7 Fiberglass             | 9 Other (specify below) |                         |              |       |                   |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |                 |                          |               |             |                       |                     |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
| <u>2 PVC</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4 ABS             | 6 Asbestos-Cement       | 8 Concrete Tile          |                         |                         |              |       |                   |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |                 |                          |               |             |                       |                     |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 6 Seepage pit     | 11 Fuel storage         | 16 Other (specify below) |                         |                         |              |       |                   |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |                 |                          |               |             |                       |                     |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 7 Pit privy       | 12 Fertilizer storage   | <u>SULFUR PLANT</u>      |                         |                         |              |       |                   |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |                 |                          |               |             |                       |                     |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |
| 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    |                          |                         |                         |              |       |                   |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |                 |                          |               |             |                       |                     |                          |                 |                        |  |                 |            |                         |  |             |                   |                      |  |

| FROM       | TO       | PLUGGING MATERIALS                        |
|------------|----------|-------------------------------------------|
| <u>158</u> | <u>3</u> | <u>BENTONITE CHIPS (21.47 cubic Feet)</u> |
| <u>3</u>   | <u>0</u> | <u>COMPACTED SOIL</u>                     |
|            |          |                                           |
|            |          |                                           |
|            |          |                                           |
|            |          |                                           |
|            |          |                                           |

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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>03-18-99</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>559</u> ..... This Water Well Record was completed on (mo/day/year) <u>04-09-99</u> ..... under the business name of <u>MARTIN WATER WELLS DRILLING</u> by (signature) <u>M. S. MAZE</u> |  |
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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: 913/296-3565. Send one to Water Well Owner and retain one for your records.