

|                                                                                                                                                                                                                                                                                                          |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------------------------|--------------------------------|----------------|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                |             | Fraction                                                                           |                                | Section Number |    | Township Number                                                                                                                                                                                                     |  | Range Number  |  |
| County: <b>Johnson</b>                                                                                                                                                                                                                                                                                   |             | <b>SE ¼ NE ¼ NE ¼</b>                                                              |                                | <b>3</b>       |    | <b>T 14 S</b>                                                                                                                                                                                                       |  | <b>R 23 E</b> |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>1001 W. Old Hwy. 56, Olathe</b>                                                                                                                                                                    |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 2 WATER WELL OWNER: <b>Northrop Grumman Guidance and Electronics Company, Inc.</b>                                                                                                                                                                                                                       |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| RR#, St. Address, Box # : <b>1480 Century Park East</b> Board of Agriculture, Division of Water Resources                                                                                                                                                                                                |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| City, State, ZIP Code : <b>Los Angeles, CA 90067</b> Application Number:                                                                                                                                                                                                                                 |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                     |             | 4 DEPTH OF COMPLETED WELL <b>33.5</b> ft. ELEVATION: <b>1057.18 (TOC)</b>          |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Depth(s) Groundwater Encountered 1 <b>20</b> ft. 2 _____ ft. 3 _____ ft.           |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr       |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm       |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
|                                                                                                                                                                                                                                                                                                          |             | Bore Hole Diameter <b>8.25</b> in. to <b>33.5</b> 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) <b>10 Monitoring well</b>                                                                                                                                                                                                                         |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted                                                                                                                                                                              |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Water Well Disinfected? Yes _____ No <b>X</b>                                                                                                                                                                                                                                                            |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                             |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____                                                                                                                                                                                                               |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 2 <b>PVC</b> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____                                                                                                                                                                                                                                |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 7 Fiberglass _____ Threaded _____ Flush _____                                                                                                                                                                                                                                                            |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Blank casing diameter <b>2</b> in. to <b>18.5</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.                                                                                                                                                                                            |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Casing height above land surface <b>Flushmount*</b> in., weight <b>0.703</b> lbs./ft. Wall thickness or gauge No. <b>SCH. 40</b>                                                                                                                                                                         |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                  |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 7 <b>PVC</b> 10 Asbestos-cement                                                                                                                                                                                                                                   |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____                                                                                                                                                                                                                           |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 3 Mill slot 9 ABS 12 None used (open hole)                                                                                                                                                                                                                                                               |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                      |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 1 Continuous slot 3 <b>Mill slot</b> 5 Gauzed wrapped 8 Saw cut 11 None (open hole)                                                                                                                                                                                                                      |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes                                                                                                                                                                                                                                          |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 7 Torch cut 10 Other (specify) _____                                                                                                                                                                                                                                                                     |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| SCREEN-PERFORATED INTERVALS: From <b>18.5</b> ft. to <b>33.5</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                         |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| GRAVEL PACK INTERVALS: From <b>16</b> ft. to <b>33.5</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                 |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <b>Bentonite</b> 4 Other _____                                                                                                                                                                                                                          |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Grout Intervals From <b>0.5</b> ft. to <b>16</b> 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? _____ How many feet? _____                                                                                                                                                                                                                                                          |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| FROM                                                                                                                                                                                                                                                                                                     | TO          | CODE                                                                               | LITHOLOGIC LOG                 | FROM           | TO | NOTES                                                                                                                                                                                                               |  |               |  |
| <b>0</b>                                                                                                                                                                                                                                                                                                 | <b>0.5</b>  |                                                                                    | <b>Asphalt</b>                 |                |    | <b>* Flushmount wellhead protected by a Morrison 418 series or equivalent manhole, which is encased in cement sloped to allow drainage away from manhole. Well casing protected by a 2" locking Torquer j-plug.</b> |  |               |  |
| <b>0.5</b>                                                                                                                                                                                                                                                                                               | <b>10</b>   |                                                                                    | <b>Clay, gray brown</b>        |                |    |                                                                                                                                                                                                                     |  |               |  |
| <b>10</b>                                                                                                                                                                                                                                                                                                | <b>26</b>   |                                                                                    | <b>Shale, weathered, brown</b> |                |    |                                                                                                                                                                                                                     |  |               |  |
| <b>26</b>                                                                                                                                                                                                                                                                                                | <b>33.5</b> |                                                                                    | <b>Shale, brown</b>            |                |    |                                                                                                                                                                                                                     |  |               |  |
| GPS Coordinates:                                                                                                                                                                                                                                                                                         |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Northing: <b>209713.1397</b>                                                                                                                                                                                                                                                                             |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Easting: <b>2213166.8898</b>                                                                                                                                                                                                                                                                             |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1) constructed</b> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) <b>11/10/10</b> and this record is true to the best of my knowledge and belief. Kansas                                |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| Water Well Contractor's License No. <b>531</b> This Water Well Record was completed on (mo/day/yr) <b>12/16/10</b>                                                                                                                                                                                       |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| under the business name of <b>Geotechnical Services Inc.</b> by (signature) _____                                                                                                                                                                                                                        |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records. |             |                                                                                    |                                |                |    |                                                                                                                                                                                                                     |  |               |  |

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