

1 LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 SW 1/4 Section Number 11 Township Number T 18 S Range Number R 4 EW

Distance and direction from nearest town or city street address of well if located within city? US Hwy 77 & Main St., Lincolnville

2 WATER WELL OWNER: Kansas Dept. of Health & Environment RR#, St. Address, Box #: 1000 SW Jackson St., Suite 410 Board of Agriculture, Division of Water Resources City, State, ZIP Code: Topeka, Kansas 66612-1367 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing a 2x2 grid with NW, NE, SW, SE sections. An 'X' is marked in the SW section.] 4 DEPTH OF COMPLETED WELL: 15 ft. ELEVATION: ... WELL'S STATIC WATER LEVEL ... Pump test data: Well water was NA ft. after ... hours pumping ... gpm Est. Yield NA gpm: Well water was ... ft. after ... hours pumping ... gpm Bore Hole Diameter 8 in. to 15 ft., and ... in. to ... ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No [checked] If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No [checked]

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued Clamped Welded Threaded [checked] Blank casing diameter 2 in. to 5 ft. Dia. in. to ... ft. Dia. in. to ... ft. Casing height above land surface ... in., weight ... lbs./ft. Wall thickness or gauge No. Sch. 40 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole) SCREEN-PERFORATED INTERVALS: From 5 ft. to 15 ft. From ... ft. to ... ft. From ... ft. to ... ft. GRAVEL PACK INTERVALS: From 4 ft. to 15 ft. From ... ft. to ... ft. From ... ft. to ... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete Grout intervals: From 0 ft. to 1 ft. From 1 ft. to 4 ft. From ... ft. to ... ft. What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) Direction from well? How many feet?

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows include lithology descriptions like 'Gravel and clay', 'Clay, silty, limestone clasts, Yellow Brown', 'Shale, wthrd, w/thin LS stringer, Yellow Brn', 'Limestone, hard, Buff', 'Shale, limy, Yellow Brown', 'Shale, firm, Gray Brown'. A well identifier 'MW11, Flushmount' is noted at the bottom right.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 12/31/2013 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/yr) 1/3/14 under the business name of GeoCore, Inc. by (signature) Dale Kell

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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.