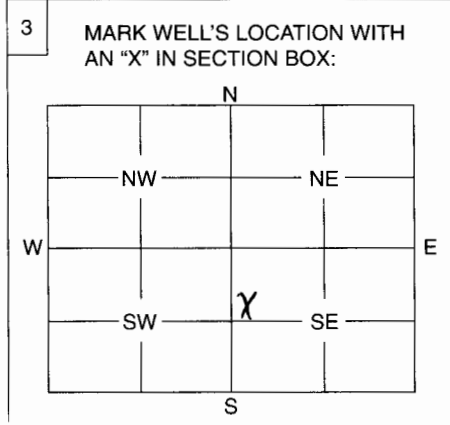


1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number  
 County: HARVEY SW 1/4 NW 1/4 SE 1/4 17 T23S R1 EW

Distance and direction from nearest town or city street address of well if located within city?  
NORTH EAST OF 4TH ST. AND MAIN ST. IN NEWTON, KS

2 WATER WELL OWNER: BURLINGTON NORTHERN SANTA FE TRW - 1 NORTH  
 RR #, St. Address, Box #: 4200 DEEN ROAD (TRENCH RECOVERY WELL)  
 City, State, ZIP Code: FORT WORTH, TX 76106 Board of Agriculture, Division of Water Resources  
 Application Number: \_\_\_\_\_



4 DEPTH OF WELL ..... 21.1 ..... ft.  
 WELL'S STATIC WATER LEVEL ..... 9 ..... ft.  
 WELL WAS USED AS:  
 1 Domestic 5 Public Water Supply 9 Dewatering  
 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well  
 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well  
 4 Industrial 8 Air Conditioning 12 Other RECOVERY WELL  
 Was a chemical / bacteriological sample submitted to Department? Yes ..... No   
 If yes, mo/day/yr sample was submitted .....  
 Water Well Disinfected: Yes  No .....

5 TYPE OF BLANK CASING USED:  
 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)  
 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile  
 Blank casing diameter 18 in. Was casing pulled? Yes ..... No  If yes, how much .....  
 Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other NATIVE SOIL  
 Grout Plug Intervals: 2 From 3 ft. to 21.1 ft., 3 From 0.5 ft. to 3 ft., 4 From 0 to 0.5 ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) DIESEL FUEL  
 2 Sewer lines 7 Pit privy 12 Fertilizer storage  
 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  
 Direction from well? ON PROPERTY How many feet? 0

FROM	TO	PLUGGING MATERIALS
0	0.5	NATIVE SOIL
0.5	3	BENTONITE - HOLEPLUG
3	21.1	CEMENT GROUT

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) AUGUST 24, 2004 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 581 This Water Well Record was completed on (mo/day/year) 9-8-04 under the business name of LAYNE CHRISTENSEN COMPANY by (signature) [Signature]

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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.