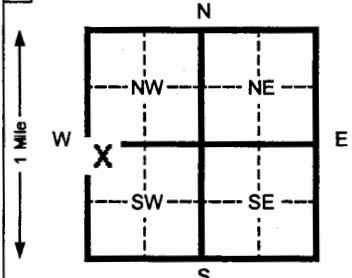


1 LOCATION OF WATER WELL: County: Sedgwick	Fraction NW ¼ NW ¼ SW ¼	Section Number 31	Township Number T 25 S	Range Number R 01 E
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Distance and direction from nearest town or city street address of well if located within city?
100 S. Meridian, Valley Center

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	M&M Convenience Stores, Inc. 2849 W. 4th Avenue El Dorado, KS 67042	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL	25 ft.	ELEVATION:	1343.45 (TOC)
Depth(s) Groundwater Encountered	1 13 ft.	2 _____ ft.	3 _____ ft.
WELL'S STATIC WATER LEVEL	12.33 ft. below land surface	measured on	1-26-05 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	8.5 in. to 25.5 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
	2 Irrigation	4 Industrial	7 Lawn and garden (domestic)
			10 Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X	If yes, mo/day/yr sample was submitted _____		
Water Well Disinfected? Yes _____ No X			

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 _____
Blank casing diameter	4 in. to 10 ft.	Dia _____ in. to _____ ft.	Dia _____ in. to _____ ft.	Dia _____ in. to _____ ft.						
Casing height above land surface	Flush in., weight	2.0 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 10 ft. to 25 ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS:	From 8 ft. to 25 ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____												
Grout Intervals	From 0.5 ft. to 8 ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ 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)

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5		Concrete			
0.5	21		Silty sand, with clay, high plasticity, well sorted, fine to med grained			
21	25		Sand, well sorted, med. to coarse grained			

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/yr) 2-17-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 3-9-05 under the business name of Geotechnical Services, Inc. by (signature) <i>[Signature]</i>

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.