

1 LOCATION OF WATER WELL: County: Brown	Fraction SW ¼ NE ¼ NW ¼	Section Number 29	Township Number 2S	Range Number 17E
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Distance and direction from nearest town or city street address of well if located within city?
 900 Oregon, Hiawatha, KS

2 WATER WELL OWNER: Brown County Cooperative RR#, St. Address, Box #: 900 Oregon City, State, ZIP Code: Hiawatha, KS	Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>NA</u> Longitude: <u>NA</u> Elevation: <u>NA</u> Datum: <u>NA</u> Data Collection Method: <u>NA</u>
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3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF WELL <u>12.03</u> ft. MW1 WELL'S STATIC WATER LEVEL <u>NA</u> ft. WELL WAS USED AS: <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">1 Domestic</td> <td style="width: 33%;">5 Public Water Supply</td> <td style="width: 33%;">9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other _____</td> </tr> </table> <p style="text-align: right;">Was a chemical/bacteriological sample submitted to Department? Yes ___ No <u>X</u></p>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other _____
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5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	_____

Blank casing diameter 2 in. Was casing pulled? Yes x No ___ If yes, how much 3ft
 Casing height above or below land surface NA in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout **3** Bentonite **4** Other Gravel: 0-0.3 ft; Soil: 0.3-3ft

Grout Plug Intervals: From 3 ft. to 12.03 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)
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	Direction from well?
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet?

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	0.3	Gravel			
0.3	3	Soil			
3	12.03	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/7/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 8/11/14 under the business name of Larsen and Associates, Inc. by (signature)

INSTRUCTIONS: Please fill in blanks 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. Visit us at <http://www.kdheks.gov/waterwell>.

NOTE: Figures exhibited within this report are only to be used within the context of this report. Placement of property lines, wells, structures, and roads is based on the available information from county appraiser maps, surveys, site visits, and/or previous vendor reports and should be considered approximate.

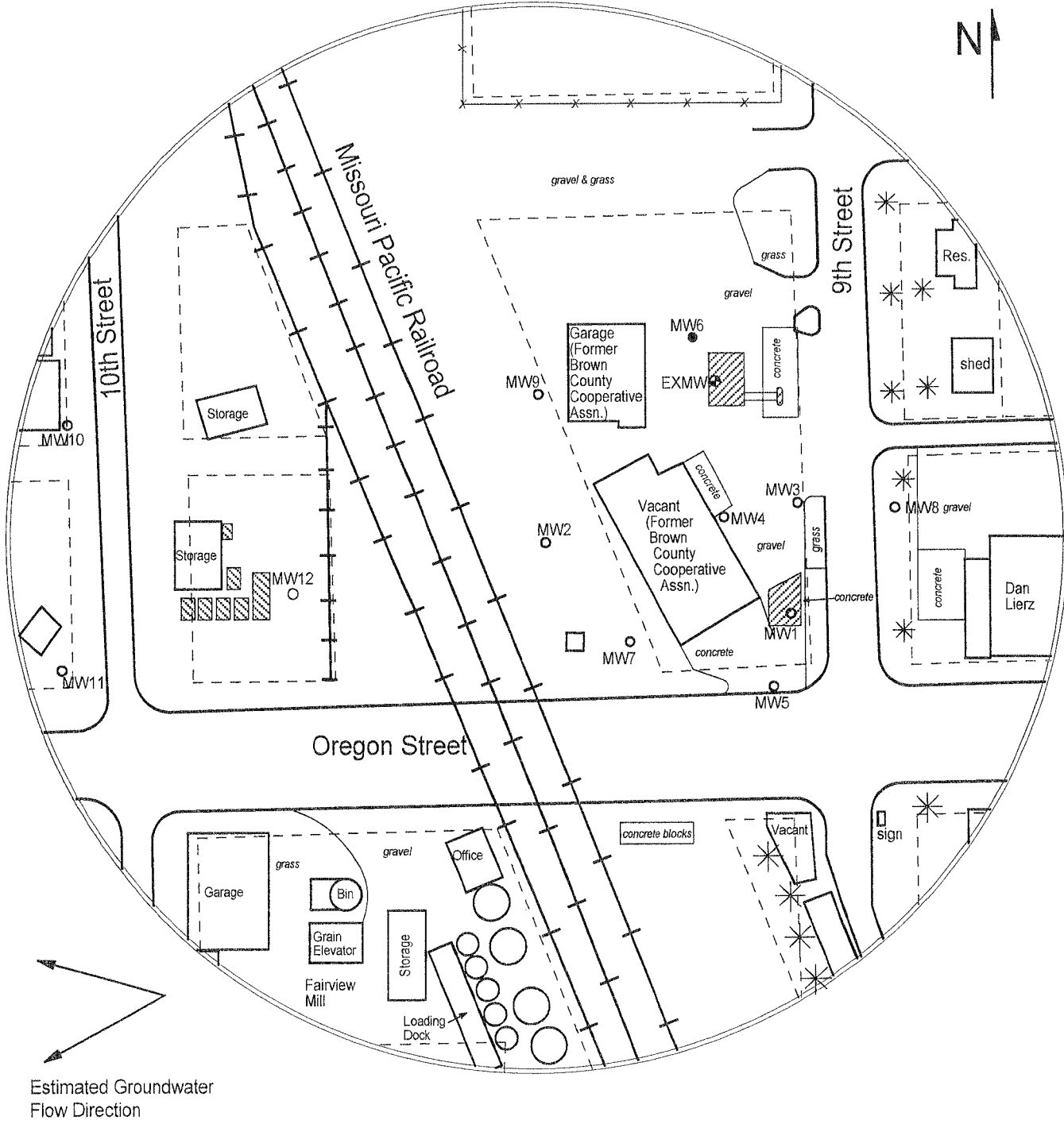


FIGURE 1 - AREA BASE MAP

LEGEND:

- Approximate Location of Former UST Basin, Product Line & Pump Island
- Approximate Location of Active AST
- Approximate Location of Property Line
- Existing Monitoring Well
- Leak Detection Well
- Plugged Monitoring Well

NOTE: Well MW6 was unable to be located.
NOTE: Approximate location of active product lines is unknown.

PROJECT:
Brown County Cooperative Assn.
900 Oregon
Hiawatha, KS
KDHE ID: U4-007-01181
Date: 8/7/14

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