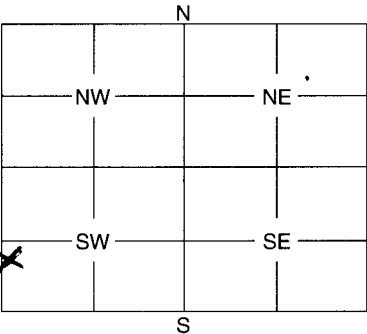


1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number																											
	County: <u>Butler</u>	<u>NW 1/4 SW 1/4 SW 1/4</u>	<u>5</u>		<u>26</u>		<u>3</u>	<u>0</u> <u>NW</u>																											
Distance and direction from nearest town or city street address of well if located within city? <u>3/4 mile North of 254-Hwy 3/4 mile West of Benton, KS</u> <u>MW # 47</u>																																			
2	WATER WELL OWNER: <u>El Paso Corporation</u>																																		
	RR #, St. Address, Box #: <u>2 North Nevada</u>				Board of Agriculture, Division of Water Resources																														
	City, State, ZIP Code: <u>Colorado Springs Co 80903</u>				Application Number: _____																														
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">  </div>		4	DEPTH OF WELL <u>22</u> ft.																															
WELL'S STATIC WATER LEVEL ft.																																			
WELL WAS USED AS:																																			
1 Domestic			5 Public Water Supply			9 Dewatering																													
2 Irrigation			6 Oil Field Water Supply			<input checked="" type="radio"/> 10 Monitoring Well																													
3 Feedlot			7 Domestic (Lawn & Garden)			11 Injection Well																													
4 Industrial			8 Air Conditioning			12 Other																													
Was a chemical / bacteriological sample submitted to Department? Yes No <u>✓</u>																																			
If yes, mo/day/yr sample was submitted																																			
Water Well Disinfected: Yes No <u>✓</u>																																			
5	TYPE OF BLANK CASING USED:																																		
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <input checked="" type="radio"/> PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile 																																		
Blank casing diameter <u>4</u> in. Was casing pulled? Yes <u>✓</u> No If yes, how much <u>12</u>																																			
Casing height above or below land surface <u>32</u> in.																																			
6	GROUT PLUG MATERIAL: 1 Neat cement <input checked="" type="radio"/> Cement grout 3 Bentonite 4 Other <u>Top Soil</u>																																		
Grout Plug Intervals: From <u>22</u> ft. to <u>1</u> ft., From ft. to ft., From <u>1</u> ft. to <u>0</u> ft.																																			
What is the nearest source of possible contamination:																																			
1 Septic tank			6 Seepage pit			<input checked="" type="radio"/> Fuel storage																													
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																													
						16 Other (specify below)																													
Direction from well? <u>North</u> How many feet? <u>2000</u>																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>22</u></td> <td><u>1</u></td> <td><u>CEMENT Grout w 6% Bentonite</u></td> </tr> <tr> <td><u>1</u></td> <td><u>0</u></td> <td><u>Topsoil</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>									FROM	TO	PLUGGING MATERIALS	<u>22</u>	<u>1</u>	<u>CEMENT Grout w 6% Bentonite</u>	<u>1</u>	<u>0</u>	<u>Topsoil</u>																		
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7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>10-15-02</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>575</u> This Water Well Record was completed on (mo/day/year) <u>11-14-02</u> under the business name of <u>Funkhouser Drilling Service Inc.</u> by (signature) <u>[Signature]</u>																																		
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.																																			