

<b>1 LOCATION OF WATER WELL:</b> County: <u>Sedgwick</u>	Fraction <u>SW 1/4 NW 1/4 SE 1/4</u>	Section <u>4</u>	Township <u>27 S</u>	Range <u>1 E</u>
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Distance and direction from nearest town or city street address of well if located within city?  
1500' N of SW corner of Elposo Property off of 21st St.

<b>2 WATER WELL OWNER:</b> <u>Elposo Merchant Energy Petroleum Co.</u> RR #, St. Address, Box #: <u>2 N. Nevada</u> City, State, ZIP Code: <u>Cabildo Springs, Co 80903</u>	Board of Agriculture, Division of Water Resources Application Number:
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<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"> </div>	<b>4 DEPTH OF WELL</b> <u>37.1</u> ft. <b>WELL'S STATIC WATER LEVEL</b> <u>126</u> ft. <b>WELL WAS USED AS:</b> <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td><input checked="" type="checkbox"/> 11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> <p>Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/>          If yes, mo/day/yr sample was submitted .....</p> <p>Water Well Disinfected: Yes ..... No <input checked="" type="checkbox"/></p>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	<input checked="" type="checkbox"/> 11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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<b>5 TYPE OF BLANK CASING USED:</b> 1 Steel    3 RMP (SR)    5 Wrought    7 Fiberglass    9 Other (Specify below) <input checked="" type="checkbox"/> 2 PVC    4 ABS    6 Asbestos-Cement    8 Concrete Tile	Blank casing diameter <u>6</u> in.    Was casing pulled? Yes <input checked="" type="checkbox"/> No ..... Casing height above or below land surface <u>3.6</u> in.    If yes, how much <u>3'</u>
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<b>6 GROUT PLUG MATERIAL:</b> <input checked="" type="checkbox"/> 1 Neat cement    2 Cement grout    3 Bentonite    4 Other ..... Grout Plug Intervals: From <u>37.1</u> ft. to <u>3</u> ft., From ..... ft. to ..... ft., From ..... to ..... ft.	What is the nearest source of possible contamination: 1 Septic tank    6 Seepage pit <input checked="" type="checkbox"/> 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 5 Cess Pool    10 Livestock pens    15 Oil well/Gas well
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Direction from well? East    How many feet? Various

FROM	TO	PLUGGING MATERIALS
37.1	3	Neat cement
3	0	Top soil

<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>12/14/05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u> <u>JAN 6, 2006</u> under the business name of <u>Loyne Christensen</u> by (signature) <u>Russell W. Redding</u>	This Water Well Record was completed on (mo/day/year)
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**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: 785/296-3565. Send one to Water Well Owner and retain one for your records.