WATER WELL RECORD Form WWC-5 KSA 82a-1212 MW-11

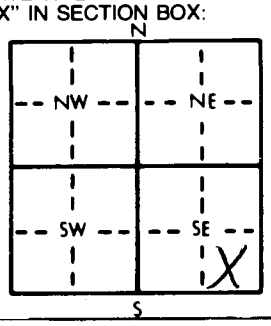
1 LOCATION OF WATER WELL: County: Sedgwick	Fraction: SE ¼ SE ¼ SE ¼	Section Number: 19	Township Number: T 27 S	Range Number: R 2 (E)/W

Distance and direction from nearest town or city street address of well if located within city? 7210 East Kellogg Wichita

2 WATER WELL OWNER: Amoco Corporation
RR#, St. Address, Box # : PO BOX 15748
City, State, ZIP Code : Shawnee Mission, KS

Board of Agriculture, Division of Water Resources Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 25 ft. ELEVATION:
Depth(s) Groundwater Encountered 1. — ft. 2. — ft. 3. — ft.
WELL'S STATIC WATER LEVEL 8.65 ft. below land surface measured on mo/day/yr 08/21/02
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 in. to 25 ft., and — in. to — ft.
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and garden only (10) Monitoring well MW-11
Was a chemical/bacteriological sample submitted to Department? Yes ..... No X ; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes (No)

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....
(2) PVC 4 ABS 7 Fiberglass Threaded .....
Blank casing diameter 2 in. to 25 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface -6 in., weight ..... lbs./ft. Wall thickness or gauge No. .....
TYPE OF SCREEN OR PERFORATION MATERIAL: (7) PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot (3) Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....
SCREEN-PERFORATED INTERVALS: From NA ft. to NA ft., From NA ft. to NA ft.
From — ft. to — ft., From — ft. to — ft.
GRAVEL PACK INTERVALS: 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 ft. to 25 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy (11) Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage .....
Direction from well? N How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			0	25	Bentonite

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/year) 08/22/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 568 This Water Well Record was completed on (mo/day/yr) .....
under the business name of MAKS by (signature) David [illegible]

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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.