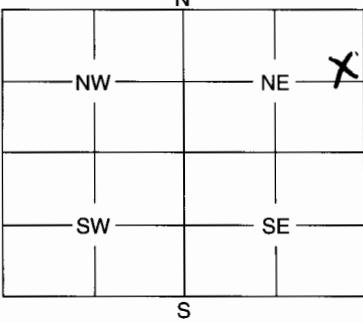


1	LOCATION OF WATER WELL: County: <i>Butcher</i>	Fraction <i>SE 1/4 NE 1/4 NE</i>	Section Number <i>19</i>	Township Number <i>27</i>	Range Number <i>3 E</i>	Number <i>EW</i>																											
Distance and direction from nearest town or city street address of well if located within city? <i>345 N. Andover Road, Andover, Kansas</i>																																	
2	WATER WELL OWNER: RR #, St. Address, Box #: City, State, ZIP Code	Coastal Mart Inc. #7314 <i>2 N. Nevada 20 Springs, CO 80903</i>					Board of Agriculture, Division of Water Resources Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <i>29.24</i>	ft.	WELL'S STATIC WATER LEVEL <i>25.72</i>	ft.	MW-10																											
		WELL WAS USED AS: <table> <tr><td>1 Domestic</td><td>5 Public Water Supply</td></tr> <tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td></tr> <tr><td>3 Feedlot</td><td>7 Domestic (Lawn & Garden)</td></tr> <tr><td>4 Industrial</td><td>8 Air Conditioning</td></tr> </table>					1 Domestic	5 Public Water Supply	2 Irrigation	6 Oil Field Water Supply	3 Feedlot	7 Domestic (Lawn & Garden)	4 Industrial	8 Air Conditioning																			
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Was a chemical / bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <i>X</i>																																	
5	TYPE OF BLANK CASING USED:																																
<input checked="" type="radio"/> 1 Steel <input type="radio"/> 3 RMP (SR) <input type="radio"/> 5 Wrought <input type="radio"/> 7 Fiberglass <input type="radio"/> 9 Other (Specify below) <input checked="" type="radio"/> 2 PVC <input type="radio"/> 4 ABS <input type="radio"/> 6 Asbestos-Cement <input type="radio"/> 8 Concrete Tile																																	
Blank casing diameter <i>2"</i> in.		Was casing pulled? Yes <i>X</i>		No If yes, how much <i>3'</i>																													
Casing height above or below land surface in.																																	
6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other	<i>Soil</i>																											
Grout Plug Intervals: From ft. to ft.		From <i>0</i> ft. to <i>29.24</i> ft., From <i>0'</i> to <i>3'</i> ft.																															
What is the nearest source of possible contamination:																																	
<input type="radio"/> 1 Septic tank <input type="radio"/> 2 Sewer lines <input type="radio"/> 3 Watertight sewer lines <input type="radio"/> 4 Lateral lines <input type="radio"/> 5 Cess pool		<input type="radio"/> 6 Seepage pit <input type="radio"/> 7 Pit privy <input type="radio"/> 8 Sewage lagoon <input type="radio"/> 9 Feedyard <input type="radio"/> 10 Livestock pens		<input type="radio"/> 11 Fuel storage <input type="radio"/> 12 Fertilizer storage <input type="radio"/> 13 Insecticide storage <input type="radio"/> 14 Abandoned water well <input type="radio"/> 15 Oil well/Gas well		16 Other (specify below)																											
Direction from well? <i>East</i>		How many feet? <i>150'</i>																															
<table border="1"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr><td><i>0</i></td><td><i>3</i></td><td><i>Soil</i></td></tr> <tr><td><i>3</i></td><td><i>29.26</i></td><td><i>Bentonite</i></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	<i>0</i>	<i>3</i>	<i>Soil</i>	<i>3</i>	<i>29.26</i>	<i>Bentonite</i>																		
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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) <i>3/14/09</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>313012009</i> — his Water Well Record was completed on (mo/day/year) <i>3/30/2009</i> under the business name of <i>Mitch Americas Inc</i> by (signature) <i>Kirk & Dahlberg</i>
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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, 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.