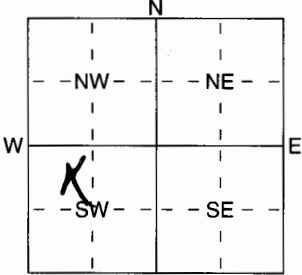


1 LOCATION OF WATER WELL: Fraction NW 1/4 S 1/2 1/4 - 1/4 Section Number 25 Township Number T 32 S Range Number R 15 E
 County: Montgomery
 Distance and direction from nearest town or city street address of well if located within city? 800 N 21st St

2 WATER WELL OWNER: Earth Care Products
 RR#, St. Address, Box # : 800 N 21st Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Independence, KS 67301 Application Number: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL 10.5 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered: 1 4 ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL 10.6 ft. below land surface measured on mo/day/yr 4/13/65
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 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 Domestic (lawn & garden) 10 Monitoring well MW 2
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes _____ No (No)

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 Blank casing diameter 2 in. to 5.5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface Flush in., weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 8 RMP (SR) 10 Asbestos-Cement 11 Other (Specify) _____
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) _____ ft. 11 None (open hole)
 SCREEN-PERFORATED INTERVALS: From 10.5 ft. to 5.5 ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 10.5 ft. to 4.0 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 4 ft. to 2 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 13 Insecticide storage 16 Other (specify below) near MW-16
 Direction from well? NW SE How many feet? 450 ft

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Topsoil			
1.5	5.6	Silty clay silt			

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) 4-6-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 704 This Water Well Record was completed on (mo/day/yr) 4-15-05 under the business name of MAXS by (signature) David Nunn

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., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.