

WATER WELL RECORD

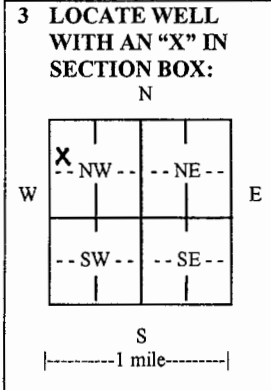
Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Montgomery Fraction NE 1/4 SW 1/4 NW 1/4 NW 1/4 Section Number 31 Township No. T 32 S Range Number R 16 [X]E [ ]W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: 301 W. Main St., Independence Global Positioning System (GPS) information: Latitude: 37.22316 Longitude: 95.70950 Elevation: 794.74

2 WATER WELL OWNER: Bridgestone Retail Operations RR#, Street Address, Box #: 333 E. Lake St. City, State, ZIP Code : Bloomington, IL 60108



3 LOCATE WELL WITH AN 'X' IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 14.55 ft. Depth(s) Groundwater Encountered (1) 6 ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 5.29 ft. below land surface measured on mo/day/yr. 7/17/10

5 TYPE OF CASING USED: [ ] Steel [X] PVC [ ] Other CASING JOINTS: [ ] Glued [ ] Clamped [ ] Welded [X] Threaded Casing diameter 2 in. to 15 ft. Diameter in. to ft. Diameter in. to ft. Casing height above land surface -3.5 in., Weight lbs./ft., Wall thickness or gauge No. Schedule 40

6 GROUT MATERIAL: [ ] Neat cement [ ] Cement grout [X] Bentonite [ ] Other Grout Intervals: From 0.5 ft. to 3 ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: [ ] Septic tank [ ] Lateral lines [ ] Pit privy [ ] Livestock pens [ ] Insecticide storage [ ] Other (specify below)

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Row 1: 0, 2, Fill, brown clay w. debris, MW-3. Row 2: 2, 6.8, Fat clay, gray and green-gray. Row 3: 6.8, 15, Shale, orange-brown, gray, brown.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was [X] constructed, [ ] reconstructed, or [ ] plugged under my jurisdiction and was completed on (mo/day/year) 7/15/10 and this record is true to the best of my knowledge and belief.

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.