

P2-23A

1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 36 Township Number T 34 S Range Number R 16 EW

Distance and direction from nearest town or city street address of well if located within city? 400 NORTH LINDEN, COFFEYVILLE, KS

2 WATER WELL OWNER: COFFEYVILLE RESOURCES REFINING & MARKETING, LLC RR#, St. Address, Box # : P.O. Box 1566 City, State, ZIP Code : COFFEYVILLE, KS 67337

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing section box with X in NE corner] 4 DEPTH OF COMPLETED WELL 15.0 ft. ELEVATION: ...

5 TYPE OF BLANK CASING USED: 2 PVC 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued, Clamped, Welded, Threaded X Blank casing diameter 2 in. to 10 ft., Dia SCH 40 Casing height above land surface 24 in., weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: 2 Brass 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-Cement 11 Other (Specify) 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) SCREEN-PERFORATED INTERVALS: From 15.0 ft. to 10.0 ft. GRAVEL PACK INTERVALS: From 15.0 ft. to 8.0 ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From 8.0 ft. to 1.0 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 16 Other (specify below) 13 Insecticide storage Direction from well? How many feet?

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 6-23-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 529 This Water Well Record was completed on [Signature] under the business name of GEOTECHNOLOGY, INC. by (signature)

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.