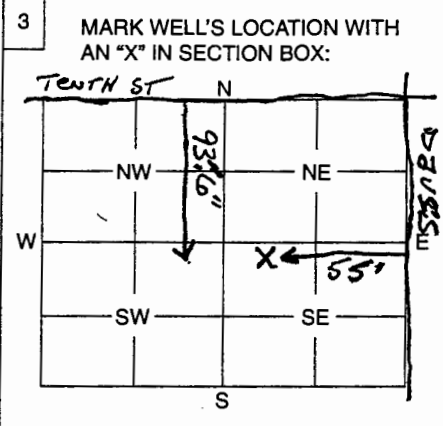


1 LOCATION OF WATER WELL: Fraction N2 SW NE NE Section Number _____ Township Number _____ Range Number _____
 County: Montgomery $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ E/W

Distance and direction from nearest town or city street address of well if located within city?
Cotteyville Resources Refining & Marketing LLC

2 WATER WELL OWNER: Cotteyville KS
 RR #, St. Address, Box #: _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: 715 E. 10TH Application Number: _____



4 DEPTH OF WELL 9'6" ft. 3' diameter
 WELL'S STATIC WATER LEVEL 9' ft.
 WELL WAS USED AS:
 1 Domestic 5 Public Water Supply 9 Dewatering
 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well
 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well
 4 Industrial 8 Air Conditioning 12 Other _____
 Was a chemical / bacteriological sample submitted to Department? Yes _____ No _____
 If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected: Yes X No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ROCK
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
 Blank casing diameter _____ in. Was casing pulled? Yes _____ No _____ If yes, how much _____
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other FLOWABLE FILL
 Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) CISTERN
 2 Sewer lines 7 Pit privy 12 Fertilizer storage
 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage
 4 Lateral lines 9 Feedyard 14 Abandoned water well
 5 Cess pool 10 Livestock pens 15 Oil well/Gas well
 Direction from well? NORTH How many feet? 190'

FROM	TO	PLUGGING MATERIALS
3'6"	3'	FLOWABLE FILL 3' BELOW GROUND SURFACE APPROXIMATE 6" THICK
9'6"	9'	CHLORINATED GRAVEL
9'	3'6"	NATIVE SOIL
3'	0	NATIVE SOIL

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12-4-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/year) _____ under the business name of _____ by (signature) [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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.