WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. MW-503

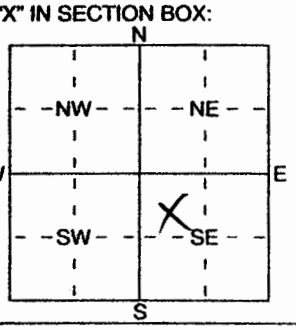
1 LOCATION OF WATER WELL: County: Atchison	Fraction ¼ NW ¼ SE ¼	Section Number 20	Township Number T 6 S	Range Number R 20 (E) W

Distance and direction from nearest town or city street address of well if located within city?
4 miles southwest of Atchison, KS

2 WATER WELL OWNER: ContiGroup Companies
RR#, St. Address, Box # : U.S. Highway 59 West
City, State, ZIP Code : Atchison, KS 66002

Board of Agriculture, Division of Water Resourc
Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 35 ft. ELEVATION: 1035.40 (GROUND)
Depth(s) Groundwater Encountered 1 15.0 ft. 2 ..... ft. 3 ..... ft
WELL'S STATIC WATER LEVEL 5.0 ft. below land surface measured on mo/day/yr DEC 2006
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gp
Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gp
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

Was a chemical/bacteriological sample submitted to Department? Yes (No); If yes, mo/day/yrs sample was su mitted
Water Well Disinfected? Yes (No)

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....
(2) PVC 4 ABS 7 Fiberglass Threaded ✓
Blank casing diameter 2 in. to 24 ft., Dia ..... in. to ..... ft., Dia ..... in. to .....
Casing height above land surface -6 in., weight ..... lbs./ft. Wall thickness or guage No. Sch 40
TYPE OF SCREEN OR PERFORATION MATERIAL: (7) PVC 10 Asbestos-Cement
1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) .....
2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot (3) Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) 0.01 SLOT
SCREEN-PERFORATED INTERVALS: From 24 ft. to 34 ft., From ..... ft. to .....
From ..... ft. to ..... ft., From ..... ft. to .....
GRAVEL PACK INTERVALS: From 22.5 ft. to 36.5 ft., From ..... ft. to .....
From 18 ft. to 22.5 ft., From ..... ft. to .....
BENTONITE

6 GROUT MATERIAL: 1 Neat cement (2) Cement grout (3) Bentonite 4 Other .....
Grout Intervals: From 0 ft. to 18 ft., From 18 ft. to 22.5 ft., From ..... ft. to .....
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage .....
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	SILTY CLAY, BROWN			
5	15	SILTY CLAY, BLACK, ORGANIC RICH			
15	35	SILTY CLAY to CLAYEY SILT BLACK, WET			
35	36.5	SILTY CLAY, GRAY			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w completed on (mo/day/year) 11/30/06 and this record is true to the best of my knowledge and belief. Kans
Water Well Contractor's Licence No 694 This Water Well Record was completed on (mo/day/yr) MARCH 27, 2007
under the business name of HWS Consulting Group by (signature) Robert L. Monroe

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.