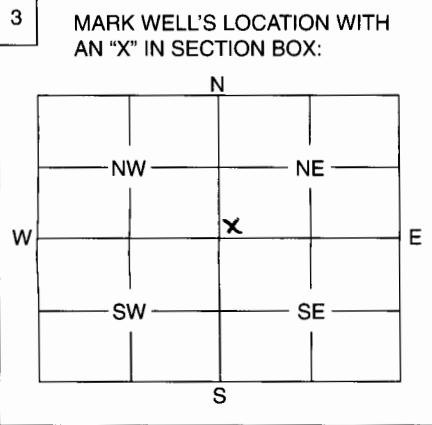


1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number
 County: Ottawa SW 1/4 SW 1/4 NE 1/4 6 11S 3 7W

Distance and direction from nearest town or city street address of well if located within city?
SW corner of Fifth Street and 3rd Avenue

2 WATER WELL OWNER: City of Minneapolis
 RR #, St. Address, Box #: 218 N. Rock
 City, State, ZIP Code: Minneapolis, KS 67467
 Board of Agriculture, Division of Water Resources Application Number: _____



4 DEPTH OF WELL 151 ft.
 WELL'S STATIC WATER LEVEL 67 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 No

5 TYPE OF BLANK CASING USED:
 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
 Blank casing diameter 1.234 in. Was casing pulled? Yes No If yes, how much 6'
 Casing height above or below land surface 6.8 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Plug Intervals: From 70 ft. to 6 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) None known
 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? How many feet?

FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>6</u>	<u>Top Soil</u>
<u>6</u>	<u>70</u>	<u>cement grout</u>
<u>70</u>	<u>151</u>	<u>chlorinated gravel</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/28/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 102 This Water Well Record was completed on (mo/day/year) 3/9/06 under the business name of Layne Christensen Co.
 by (signature) Russell W. Kedd

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.