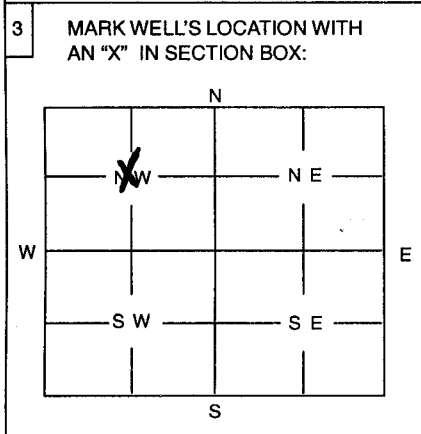


1	LOCATION OF WATER WELL: County: Ottawa	Fraction Near center NW 1/4	Section Number 35	Township Number 12	Range Number 3W
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Distance and direction from nearest town or city street address of well if located within city?
4 miles South & 1-1/2 miles West of Bennington, Ks.

2 WATER WELL OWNER: **John Adams c/o General Air**
200 S. 5th St.
 RR #, St. Address, Box #: **Salina, Ks. 67401**
 City, State, ZIP Code :
 Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF WELL **1 @ 200** ft
 WELL'S STATIC WATER LEVEL **7.8** 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 Other **Geo-loop**
 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:
 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass Other (Specify below)
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile **polyethylene**
 Blank casing diameter **3.4** 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 Bentonite 4 Other
 Grout Plug Intervals: From **0** ft. to **200** 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)
 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
0	35	Sandstone/red with Ironstone
35	95	Sandstone, lt. gray
95	100	Shale, gray
100	118	Sandstone, lt. gray
118	125	Shale, red
125	135	Sandstone, lt. gray
135	150	Shale, gray
150	180	Sandstone, lt. gray
180	183	Iron Pyrite
183	201	Shale, gray

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **3/10/06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **138** This Water Well Record was completed on (mo/day/year) **3/23/06** Under the business name of **Peterson Irrigation, Inc.** by (signature) *Mike Peterson*

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.