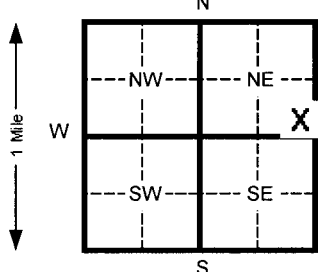


1 LOCATION OF WATER WELL: Fraction **SE ¼ SE ¼ NE ¼** Section Number **28** Township Number **T 13 S** Range Number **R 18 E/W**
 County: **Ellis**
 Distance and direction from nearest town or city street address of well if located within city?
3503 North Vine Street, Hays, Kansas, Longitude: N 38° 53.690', Latitude: W 99° 19.089'

2 WATER WELL OWNER: **Chevron Environmental Management Company**
 RR#, St. Address, Box # : **2300 Windy Ridge Way, Suite 800S** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Atlanta, Georgia 30339** Application Number:

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


4 DEPTH OF COMPLETED WELL **35** ft. ELEVATION: **-**
 Depth(s) Groundwater Encountered 1 **23** ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL **Unknown** ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **8** in. to **35** ft. and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 **Monitoring well**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 2 **PVC** 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded **X**
 Blank casing diameter **2** in. to **10** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **0** in., weight **0.682** lbs./ft. Wall thickness or gauge No. **0.154"**
 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:
 1 Continuous slot 3 **Mill slot** 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **10** ft. to **30** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **8** ft. to **31** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other _____
 Grout Intervals From **0.5** ft. to **8** ft. From **31** ft. to **35** ft. From _____ ft. to _____ 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? **Unknown** How many feet? **Unknown**

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5		Concrete			
0.5	4	03	Gray silty clay w/ < 5% fine sand			
4	15	02	Yellowish brown clayey silt w/ ~5% fine sand			
15	27	03	Yellowish brown silty clay w/ ~5% fine sand			
27	27.5	05	Very dark gray, poorly graded sand w/ 10% silt			
27.5	35	03	Yellowish brown silty clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) **3/23/05** and this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. **616** This Water Well Record was completed on (mo/day/yr) **6/9/05**
 under the business name of **Thiele Geotech, Inc.** by (signature) *D. J. Ad...*

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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