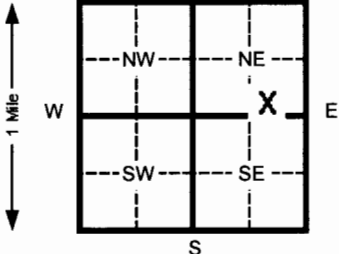


1 LOCATION OF WATER WELL: County: <b>Ellis</b>	Fraction <b>SW ¼ SE ¼ NE ¼</b>	Section Number <b>8</b>	Township Number <b>T 13 S</b>	Range Number <b>R 20 E</b>
Distance and direction from nearest town or city street address of well if located within city? <b>1000 Washington, Ellis, Kansas</b>				
2 WATER WELL OWNER: <b>Stop 2 Shop</b> RR#, St. Address, Box # : <b>3502 Fairway</b> City, State, ZIP Code : <b>Hays, Kansas 67601</b> Board of Agriculture, Division of Water Resources Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL <b>25.0</b> ft. ELEVATION: Depth(s) Groundwater Encountered 1 <b>14.0</b> ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <b>12.05</b> ft. below land surface measured on mo/day/yr <b>08/11/07</b> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <b>NA</b> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <b>8.5</b> in. to <b>25.0</b> 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) <b>Remedial Test Well</b> 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <b>X</b>		
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 <b>X</b> Blank casing diameter <b>2.375</b> in. to <b>23.0</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <b>Flush Mount</b> in., weight _____ lbs./ft. Wall thickness or gauge No. <b>Schedule 40</b> TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 3 Mill slot 6 Wire wrapped 9 Drilled holes 4 Key punched 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From <b>25.0</b> ft. to <b>23.0</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <b>25.0</b> ft. to <b>21.0</b> 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 <b>0.0</b> ft. to <b>1.0</b> ft. From <b>1.0</b> ft. to <b>21.0</b> 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? <b>West</b> How many feet? <b>5</b> FROM TO CODE LITHOLOGIC LOG <b>0.0 4.0</b> <b>Light gray sandy clay, wet</b> <b>4.0 19.0</b> <b>Dark brown silty clay, moist-wet</b> <b>19.0 25.0</b> <b>Light gray silty clay, wet; strong hydrocarbon odor</b>  <b>Flush-mount well completion waiver existent for site.</b>				
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) <b>08/02/07</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>692</b> This Water Well Record was completed on (mo/day/yr) <b>09/03/07</b> under the business name of <b>Quad State Services, Inc.</b> by (signature)				

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.