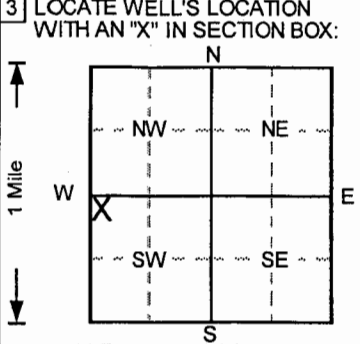


1 LOCATION OF WATER WELL: County: Saline	Fraction NW 1/4 NW 1/4 SW 1/4	Section Number 36	Township Number T 13 S	Range Number R 3 E/W
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Distance and direction from nearest town or city street address of well if located within city?
120 W. Diamond Drive, Salina

2 WATER WELL OWNER: **Triplett, Inc.**
RR#, St. Address, Box # : **P.O. Box 647**
City, State, ZIP Code : **Salina, Kansas 67402-0647**
Board of Agriculture, Division of Water Resources
Application Number:



4 DEPTH OF COMPLETED WELL **40** ft. ELEVATION:
Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr
Pump test data: Well water was **NA** ft. after hours pumping gpm
Est. Yield **NA** gpm: Well water was ft. after hours pumping gpm
Bore Hole Diameter **8** in. to **40** ft., and in. to ft.
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 Lawn and garden only 10 Monitoring ^{well}
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 iron 8 Concrete tile CASING JOINTS: Glued Clamped
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
7 Fiberglass Threaded.
Blank casing diameter **2** in. to **20** ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface **0** in., weight lbs./ft. Wall thickness or gauge No.
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 **20** ft. to **40** ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From **18** ft. to **40** 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 **Concrete**
Grout Intervals: From **0** ft. to **1** ft., From **1** ft. to **10** 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? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Clay, sl. silty, v. moist, plastic, Dark Gray			
4	9	Clay, silty, moist, stiff, Brown			
9	23	Clay, incr. silt, moist, plastic, no odor, Brown			
23	31	Clay, sl. silty, moist, stiff, no odor, Brown			
31	36	Clay, silty, occ. sat. stringrs, Brown-Grayish B			
36	40	Sand (f-c), saturated, mod. gas odor, Brown			

MW3R, Tag # 00375872, Flushmount
Project Name: Al's Diner - Monitoring
GeoCore # 338, KDHE # U5 085 01015

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/year) **10/25/2006**.
Kansas Water Well Contractor's License No. **527**. This Water Well Record was completed on (mo/day/yr) **10/27/2006** under the business name of **GeoCore, Inc.** by (signature) *[Signature]*

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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.