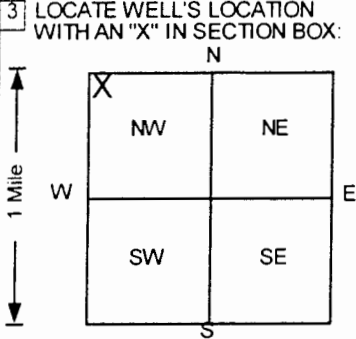


1 LOCATION OF WATER WELL: County: Saline	Fraction NW ¼ NW ¼ NW ¼	Section Number 18	Township Number T 14 S	Range Number R 2 E W
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Distance and direction from nearest town or city street address of well if located within city?
1101 E. Iron; Salina, Kansas

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:



3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [See Diagram]

4 DEPTH OF COMPLETED WELL **40** ft. ELEVATION: **1220.53**

Depth(s) Groundwater Encountered 1. **30.5** 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 **7** 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 2 PVC 3 RMP (SR) 4 ABS
 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass
 8 Concrete tile 9 Other (specify below)

CASING JOINTS: Glued Clamped Welded Threaded

Blank casing diameter **2** in. to **25** ft., Dia. in. to ft., Dia. in. to ft.
 Casing height above land surface **-3.48** in., weight lbs./ft. Wall thickness or gauge No. **Sch 40**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile
 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From **25** ft. to **40** ft. From ft. to ft.
 From ft. to ft. From ft. to ft.
 GRAVEL PACK INTERVALS: From **22.5** 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

Grout Intervals: From **0** ft. to **20** ft. From **20** ft. to **22.5** ft. From ft. to ft.

What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
Former UST Basin

Direction from well? **N** How many feet? **30**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.06	Concrete,			
0.06	5	Clay, Black Brown			
5	10	Clay, Gray Brown			
10	15	Sand, Brown Black Gray			
15	20	Sand, Brown			
20	25	Sand, Brown			
25	30	Sand, Brown Black			
30	35	Sand, Brown Black			

MW4, Tag # 00309622, Flushmount
 Project Name: East Iron Amoco
 GeoCore # 930, KDHE # U5 085 12824

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) **2/8/02** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **527**. This Water Well Record was completed on (mo/day/yr) **2/20/02** under the business name of **GeoCore Services, Inc.** by (signature) *Dale Hill*

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.