

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number	Township Number	Range Number
County: <b>Saline</b>	<b>SE ¼ SW ¼ SE ¼</b>	<b>15</b>	<b>T 14 S</b>	<b>R 3 E/W</b>	
Distance and direction from nearest town or city street address of well if located within city? <b>671 Westport Blvd. Salina, KS 67401</b>					
<b>2 WATER WELL OWNER: Triplett, Inc.</b>					
RR#, St Address, Box # : <b>P.O. Box 647</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Salina, Kansas 67402-0647</b>			Application Number:		
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL . . . . . 36 . . . . ft ELEVATION: . . . . . 0</b>			
<p>N NW NE W E SW SE S</p> <p>1 Mile</p>		Depth(s) Groundwater Encountered 1. . . . ft 2. . . . ft 3. . . . ft			
		WELL'S STATIC WATER LEVEL . . . . . 18.63 . . . . 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 . . . . in. to . . . . 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 ✓			
<b>5 TYPE OF BLANK CASING USED:</b>					
1 Steel		3 RMP (SR)		5 Wrought iron	
2 PVC		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter . . . . 2 . . . . in. to . . . . ft, Dia . . . . in. to . . . . ft, Dia . . . . in. to . . . . ft				CASING JOINTS: Glued . . . . Clamped . . . .	
Casing height above land surface . . . . 0 . . . . in., weight . . . . Sch 40 . . . . lbs./ft. Wall thickness or gauge No. . . .				Welded . . . .	
TYPE OF SCREEN OR PERFORATION MATERIAL					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 Torch cut	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		6 Wire wrapped		9 Drilled holes	
2 Louvered shutter		7 Torched cut		10 Other (specify)	
				11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From . . . . 36 . . . . ft to . . . . 26 . . . . ft, From . . . . ft to . . . . ft					
GRAVEL PACK INTERVALS: From . . . . ft to . . . . ft, From . . . . ft to . . . . ft					
<b>6 GROUT MATERIAL:</b>					
1 Neat cement		2 Cement grout		3 Bentonite	
Grout Intervals: From . . . . 36 . . . . ft to . . . . 2 . . . . ft, From . . . . ft to . . . . ft, From . . . . ft to . . . . ft				4 Other . . . .	
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		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)	
Direction from well?				How many feet? 0	
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
			36	2	Cement/Bentonite Grout
			2	0	Top Soil/Packed Dirt
					MW10.1 , Tag # .
					Project Name: Midway Conoco
					GeoCore # 132 , KDHE # U5 085 297
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) . . . . . 6/10/97 . . . . . 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) . . . . . 6/20/97 . . . . . under the business name of GeoCore Services, 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.					