

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Saline	NW 1/4 SE 1/4 SW 1/4	14	14	3-West

Distance and direction from nearest town or city street address of well if located within city?

1315 Beverly Drive, Salina, Kansas

2 WATER WELL OWNER: Ott Oil Company, Inc.	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # 1315 Beverly Drive	Application Number:
City, State, ZIP Code : Salina, Kansas 67401	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 35.0 ft.												
<div style="text-align: center;">N W E SW SE S X</div>	WELL'S STATIC WATER LEVEL 25.64 ft.												
	WELL WAS USED AS:												
	<table><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden (domestic)</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other</td></tr></table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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4 Industrial	8 Air Conditioning	12 Other											
	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	7 Fiberglass	9 Other (specify below)
2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
Blank casing diameter 2.375 in.	Was casing pulled? Yes X No _____	If yes, how much? 35.0'		
Casing height above or below land surface Unknown in.		Well overdrilled to 20'		

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other	Soils
Grout Plug Intervals From 20.0 ft. to 1.0 ft. From 1.0 ft. to 0.0 ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)		
2 Sewer lines	7 Pit privy	12 Fertilizer storage			
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage			
4 Lateral lines	9 Feedyard	14 Abandoned water well			
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well			
Direction from well? North	How many feet? 5				

FROM	TO	CODE	PLUGGING MATERIALS
0.0	1.0		Compacted soils
1.0	20.0		Bentonite chips

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 03/16/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 04/04/05 under the business name of Quad State Services, Inc.
by (signature) <i>[Signature]</i>

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 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.