

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Saline	NE ¼ NE ¼ NE ¼	2	14 S	3 EAW

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

1745 N. 9th St., Salina

2	WATER WELL OWNER:	SEI Partners, LP
	RR #, St. Address, Box #:	2900 West 121st Street
	City, State, ZIP Code	Leawood, KS 66209-1181
	Board of Agriculture, Division of Water Resources	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 20.5 ft.																																											
	<div style="text-align: center;">N</div> <table border="1" style="width: 100%;"> <tr> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td>NW</td> <td></td> <td>NE</td> <td></td> </tr> <tr> <td>W</td> <td></td> <td></td> <td>E</td> </tr> <tr> <td>SW</td> <td></td> <td>SE</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table> <div style="text-align: center;">S</div>				X	NW		NE		W			E	SW		SE																		WELL'S STATIC WATER LEVEL N/A ft. WELL WAS USED AS: <table style="width: 100%;"> <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 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td><input checked="" type="checkbox"/> Other Soil vapor extraction</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	<input checked="" type="checkbox"/> Other Soil vapor extraction
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Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <input checked="" type="checkbox"/>																																														

5	TYPE OF BLANK CASING USED:
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <input checked="" type="checkbox"/> PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
Blank casing diameter 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No If yes, how much 2' Casing height above or below land surface N/A in.	

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="checkbox"/> Bentonite	<input checked="" type="checkbox"/> Other ..Concrete.....																				
Grout Plug Intervals: From 0 ft. to 0.5 ft., From 0.5 ft. to 20.5 ft., From to ft.																									
What is the nearest source of possible contamination: <table style="width: 100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table>						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	
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Direction from well? How many feet?																									

FROM	TO	PLUGGING MATERIALS
0	0.5	Concrete
0.5	20.5	Bentonite (2")

SVE8

KDHE #U5 085 00244

GeoCore 1005

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/8/2008 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/year) 5/12/2008 under the business name of Geocore, Inc. by (signature) <i>Dale Holt</i>
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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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.