WATER WELL RECORD	Form WWG	C-5	Division of Water	r Resources App. N	
1 LOCATION OF WATER WELL: County: Saline	Fraction 1/4 SW 1/4 SW 1/4	1	Section Number 4	Township No. T 14 S	Range Number R 3 □E ☑W
Street/Rural Address of Well Location; if unknown, distance & direction			Global Positioning System (GPS) information:		
from nearest town or intersection: If at owner's address, check here .			Latitude: .38.856416 (in decimal degrees)		
Bunge Salina Elevator			Longitude: 97.663712 (in decimal degrees)		
1112 North Halstead Rd., Salina, KS 67401			Elevation: 1242.66		
2 WATER WELL OWNER: Bunge North America, Inc.			Datum: ☐ WGS 84, ☑ NAD 83, ☐ NAD 27 Collection Method:		
RR#, Street Address, Box #: PO Box 28500		1	GPS unit (Make/Model:)		
City, State, ZIP Code : St. Louis, MO 63146			☐ Digital Map/Photo, ☐ Topographic Map, ☑ Land Survey		
37 3t. E0015, INO 03 140			Est. Accuracy:		
3 LOCATE WELL 25.0					
WITH AN "X" IN 4 DEPTH OF C	COMPLETED WELL .4	77.76.6.	ft.	a ,	(3). N/A ft.
WITH AN "X" IN SECTION BOX: N 4 DEPTH OF COMPLETED WELL 25.0 ft. Depth(s) Groundwater Encountered (1) ft. (2).N/A ft. WELL'S STATIC WATER LEVEL 3.11 ft. below land surface measured on mo/day/yr.1.3.13					
Pump test data: Well water was N/A					
' Som viving to N/A					
W - NW - NE - E Bore Hole Diameter 8.25 in. to .25.0 ft., and .N/A in. to .N/Aft.					
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well					
☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)					
Irrigation Industrial Domestic-lawn & garden Monitoring well MW-15					
Was a chemical/bacteriological sample submitted to Department? Yes V No					
s If yes, mo/day/yr sample was submitted.N/A					
1 mile Water well disinfected? ☐ Yes ☑ No					
5 TYPE OF CASING USED: Steel PVC Other					
CASING TOINTS: Gland Glamped Welded VI Threaded					
Casing diameter 2 in to 15.0 ft. Diameter N/A in to N/A ft. Diameter N/A in to N/A ft.					
Casing height above land surface. 0 in., Weight N/A lbs./ft., Wall thickness or gauge No. Schedule 40					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
Steel Stainless Steel PVC Other (Specify)					
☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:					
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)					
The succeed distriction of Way symphod Wire surranged Saw cut Other (specify)					
SCREEN DEDECORATED INTERVALS: From 15 ft to 25 ft From N/A tt. to					
From IVA ft to IVA tt From IVA II. IO					
GRAVEL PACK INTERVALS: From. 12 ft. to .25 ft., From .N/A ft. to .N/A ft.					
From. N/A ft. to N/A ft., From N/A ft. to N/A ft.					
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other 0-2 feet concrete Grout Intervals: From .2					
What is the nearest source of possible contamination: Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)					
Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well					
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well					
Direction from well North			om well≲200-fe	et	TANKS TO TENTE TENTE I A T CI
FROM TO LITHOLOG					UGGING INTERVALS
0 25 Well-was-blind/drilled		6.5 0			Now-plastic Gose
0 4 Grovel fill			3 NO 18	growish a	100x 20 92,
	H / 1/11 3/11				
4 15 Sitty clay 5 x	2 46 Yellowish				
brown, moist	nigh plasticity.				
	V 1018 WE SORK				
15 16.5 Silvy sousof cla	The state of the s				
Yellowish boom	Migny brustic				
					Production with the state of th
7 CONTRACTOR'S OR LANDOWNE	R'S CERTIFICATION.	This water	well was 🗸 const	ructed, \square reconst	tructed, or D plugged
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 12-7-2012 and this record is true to the best of my knowledge and belief.					
Kansas Water Well Contractor's License No. 159 This Water Well Record was completed on (mo/day/xeat)					
under the business name of RAZEK Environmental, LLC by (signature)\					
INSTRUCTIONS. Use typowriter or hall point pen PIFASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies					
(white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Vi sit us at					
http://www.kdheks.gov/waterwell/index.html.					
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy					