WATER WELL RECO	RD	Form WV	VC-5	Division of Wa	iter Resources App. N	[O. L	
1 LOCATION OF WATE County: Saline	R WELL:	Fraction 1/4 SW 1/4 SW	1/4 SW 1/4	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: 38,856031 (in decimal degrees)			
Bunge Salina Elevator				Longitude: 97.663738 (in decimal degrees) Elevation: 1242.25			
1112 North Halstead Rd., Salina, KS 67401				Datum: WGS 84, V NAD 83, NAD 27			
2 WATER WELL OWNER: Bunge North America, Inc.			Collection Method:				
RR#, Street Address, Box #: PO Box 28500				GPS unit (Make/Model:)			
City, State, ZIP Code	s, MO 63146		☐ Digital Map/Photo, ☐ Topographic Map, ☑ Land Survey  Est. Accuracy: ☑ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m				
3 LOCATE WELL			addine additional resistance of service to residence of the foreign reliable series. Also device				
WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 26.5 ft.							
SECTION BOX: D	WITH AN "X" IN SECTION BOX:  N  4 DEPTH OF COMPLETED WELL 26.5  Depth(s) Groundwater Encountered (1) 21.75 ft. (2) N/A ft. (3) N/A  WELL'S STATIC WATER LEVEL 5 5 ft. below land surface measured on mo/day/yr. 1 1 3						
homeontennenthamanthaman	Pump test data: Well water was NA						
EST. YIELD WAgpm. Well water was N/A							
W							
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well							
-SWSE- ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☑ Monitoring well PZ-14							
Was a chemical/bacteriological sample submitted to Department? Yes No							
S If yes, mo/day/yr sample was submitted.N/A							
Water well disinfected? ☐ Yes ☑ No							
5 TYPE OF CASING USED: Steel PVC Other							
CASING IOINTS: Glued G Clamped G Welded Threaded							
Casing diameter 1. in. to .26.5 ft., Diameter .WA in. to .WA ft., Diameter .WA in. to .WA ft.							
Casing height above land surface. 30 in., Weight N/A lbs./ft., Wall thickness or gauge No. Schedule 40 TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel							
☐ 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)							
Louvered shutter Key nunched Wire wrapped Saw cut Other (specify)							
SCREEN PERFORATED INTERVALS: From 16.5 ft to 26.5 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.  GRAVEL PACK INTERVALS: From 13.5 ft. to .26.5 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							
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 Nor		TO TOO	and the second s	rom well <200-		UGGING INTERVALS	
FROM TO 0 26.5 well was	LITHOLOC blind drilled	IC LOG	FROM	TO LITHO.	LOG (cont.) of FL	OGGING INTERVALS	
U ZUJ WEII WAS	Dirid drilled						
						una artikan cerundan katangga pakan 14 a hili 19 0 / 19 kilongka pangga pangga pangka palin da Panga Penghangga pang	
	ayaa ga aanaa aa						
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \( \bigcirc\) constructed, \( \bigcirc\) reconstructed, or \( \bigcirc\) plugged under my jurisdiction and was completed on \( \text{mo}/\day/year \) .12-12-2012 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 759 This Water Well Record was completed on (mo/day/year) 110-2013							
under the business name of RAZEK Environmental, LLC by (signature)							
INSTRUCTIONS: Use ty pewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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							
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