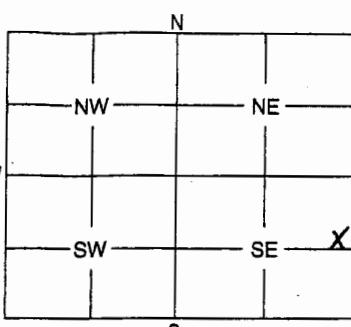


|  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
|--|---|--|---|--|--------------|------------|-----------------------|--------------|--------------|--------------------------|--------------------|-----------|----------------------------|-------------------|--------------|--------------------|----------|
| 1  | LOCATION OF WATER WELL:   | Fraction   | Section Number                          | Township Number  | Range Number |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| County: Wichita  |   | SE $\frac{1}{4}$ SE $\frac{1}{4}$ NE $\frac{1}{4}$ SE  | 18                                      | 18   | 35           |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| Distance and direction from nearest town or city street address of well if located within city?<br>129 N. 120th Rd Marienthal, KS 67863  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| 2  | WATER WELL OWNER:   | Scott Cooperative Association<br>P.O. Box 340  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| RR #, St. Address, Box #:<br>City, State, ZIP Code   |   | Board of Agriculture, Division of Water Resources<br>Application Number:<br>Scott City, KS 67871 |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| 3  | MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  | 4  | DEPTH OF WELL ..... 150 ft.             |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
|   |   |  | WELL'S STATIC WATER LEVEL ..... 129 ft. |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| WELL WAS USED AS:  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| <table border="0"> <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 &amp; Garden)</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 Domestic (Lawn & Garden) | 11 Injection Well | 4 Industrial | 8 Air Conditioning | 12 Other |
| 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  | 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:  |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| <input checked="" type="radio"/> 1 Steel <input type="radio"/> 3 RMP (SR) <input type="radio"/> 5 Wrought <input type="radio"/> 7 Fiberglass <input type="radio"/> 9 Other (Specify below)<br><input checked="" type="radio"/> 2 PVC <input type="radio"/> 4 ABS <input type="radio"/> 6 Asbestos-Cement <input type="radio"/> 8 Concrete Tile   |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| Blank casing diameter ..... 4 in.  |   | Was casing pulled? Yes ..... X   |   | No ..... If yes, how much ..... 3'   |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| Casing height above or below land surface ..... 36 in.   |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| 6  | GROUT PLUG MATERIAL:      1 Neat cement      2 Cement grout <input checked="" type="radio"/> 3 Bentonite      4 Other .....   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| Grout Plug Intervals:      From ..... 150 ft.      to ..... 3 ft.,      From ..... ft.      to ..... ft.,      From ..... ft.      to ..... ft.  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| What is the nearest source of possible contamination:  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| 1 Septic tank<br>2 Sewer lines<br>3 Watertight sewer lines<br>4 Lateral lines<br>5 Cess pool   |   | 6 Seepage pit<br>7 Pit privy<br>8 Sewage lagoon<br>9 Feedyard<br>10 Livestock pens               |   | <input checked="" type="radio"/> 11 Fuel storage<br>12 Fertilizer storage<br>13 Insecticide storage<br>14 Abandoned water well<br>15 Oil well/Gas well |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| Direction from well? ..... S      How many feet? ..... 100   |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| FROM   | TO  | PLUGGING MATERIALS   |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| 150'   | 3'  | Bentonite chips  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| 3'   | 0'  | Native material  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
|  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
|  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
|  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
|  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
|  |   |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |
| 7  | CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-14-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ..... This Water Well Record was completed on (mo/day/year) 7-16-09 under the business name of Green Field Contractors by (signature) John Peckham |  |   |  |              |            |                       |              |              |                          |                    |           |                            |                   |              |                    |          |