

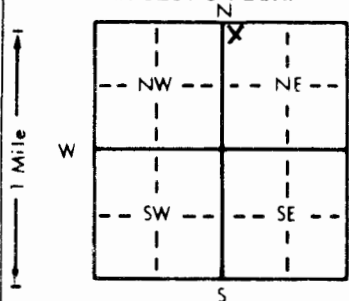
|                           |                             |                |                 |                |
|---------------------------|-----------------------------|----------------|-----------------|----------------|
| 1 LOCATION OF WATER WELL: | Fraction                    | Section Number | Township Number | Range Number   |
| County: <u>BARTON</u>     | <u>NW 1/4 NW 1/4 NE 1/4</u> | <u>13</u>      | T <u>19</u> S   | R <u>13</u> EW |

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

BARTON COUNTY LANDFILL

|                         |                               |                                                   |
|-------------------------|-------------------------------|---------------------------------------------------|
| 2 WATER WELL OWNER:     | <u>BARTON COUNTY LANDFILL</u> | <u>GMP-3</u>                                      |
| RR#, St. Address, Box # | <u>350 NE 30th ROAD</u>       | Board of Agriculture, Division of Water Resources |
| City, State, ZIP Code   | <u>GREAT BEND KS 67530</u>    | Application Number:                               |

|                                                      |                           |    |                |
|------------------------------------------------------|---------------------------|----|----------------|
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 DEPTH OF COMPLETED WELL | 25 | ft. ELEVATION: |
|------------------------------------------------------|---------------------------|----|----------------|

Depth(s) Groundwater Encountered 1. NA ft. 2. NA ft. 3. NA ft.WELL'S STATIC WATER LEVEL NA ft. below land surface measured on mo/day/yrPump test data: Well water was NA ft. after NA hours pumping NA gpmEst. Yield NA gpm: Well water was NA ft. after NA hours pumping NA gpmBore Hole Diameter 6 in. to NA ft., and NA in. to NA ft.

WELL WATER TO BE USED AS:

|              |              |                          |                    |                          |
|--------------|--------------|--------------------------|--------------------|--------------------------|
| 1 Domestic   | 3 Feedlot    | 6 Oil field water supply | 9 Dewatering       | 11 Injection well        |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden only   | 10 Monitoring well | 12 Other (Specify below) |

Was a chemical/bacteriological sample submitted to Department? Yes NA No NA; If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes NA No NA

|                              |                |                 |                                                  |
|------------------------------|----------------|-----------------|--------------------------------------------------|
| 5 TYPE OF BLANK CASING USED: | 5 Wrought iron | 8 Concrete tile | CASING JOINTS: Glued <u>NA</u> Clamped <u>NA</u> |
|------------------------------|----------------|-----------------|--------------------------------------------------|

|         |            |                   |                         |                    |
|---------|------------|-------------------|-------------------------|--------------------|
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | 9 Other (specify below) | Welded <u>NA</u>   |
| 2 PVC   | 4 ABS      | 7 Fiberglass      |                         | Threaded <u>NA</u> |

Blank casing diameter 1.0 in. to 5 ft., Dia. NA in. to NA ft., Dia. NA in. to NA ft.Casing height above land surface 30 in., weight NA lbs./ft. Wall thickness or gauge No. NA

TYPE OF SCREEN OR PERFORATION MATERIAL:

|         |                    |                 |            |                    |
|---------|--------------------|-----------------|------------|--------------------|
| 1 Steel | 3 Stainless steel  | 5 Fiberglass    | 8 RMP (SR) | 10 Asbestos-cement |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 9 ABS      | 11 Other (specify) |

SCREEN OR PERFORATION OPENINGS ARE:

|                    |               |                  |                 |                     |
|--------------------|---------------|------------------|-----------------|---------------------|
| 1 Continuous slot  | 2 Mill slot   | 3 Gauzed wrapped | 8 Saw cut       | 11 None (open hole) |
| 2 Louvered shutter | 4 Key punched | 6 Wire wrapped   | 9 Drilled holes |                     |

SCREEN-PERFORATED INTERVALS: From 5.0 ft. to 25.0 ft., From NA ft. to NA ft., From NA ft. to NA ft.GRAVEL PACK INTERVALS: From 4.0 ft. to 25.0 ft., From NA ft. to NA ft., From NA ft. to NA ft.

GROUT MATERIAL:

Grout Intervals: From 0 ft. to 1.0 ft., From 1.0 ft. to 4.0 ft., From 4.0 ft. to NA ft.

What is the nearest source of possible contamination:

|               |                 |                 |                   |                         |
|---------------|-----------------|-----------------|-------------------|-------------------------|
| 1 Septic tank | 4 Lateral lines | 7 Pit privy     | 10 Livestock pens | 14 Abandoned water well |
| 2 Sewer lines | 5 Cess pool     | 8 Sewage lagoon | 11 Fuel storage   | 15 Oil well/Gas well    |

|                          |               |            |                        |                          |
|--------------------------|---------------|------------|------------------------|--------------------------|
| 3 Watertight sewer lines | 6 Seepage pit | 9 Feedyard | 12 Fertilizer storage  | 16 Other (specify below) |
|                          |               |            | 13 Insecticide storage |                          |

Direction from well? How many feet?

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

|     |      |         |  |  |  |
|-----|------|---------|--|--|--|
| 0.0 | 4.0  | Topsoil |  |  |  |
| 4.0 | 25.0 | SILT    |  |  |  |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 1 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 2-19-97 and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. 416 This Water Well Record was completed on (mo/day/yr) 5-1-97under the business name of TERRALON CONSULTANTS INC by (signature) Clay P. Nye

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.