WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO. 00095558

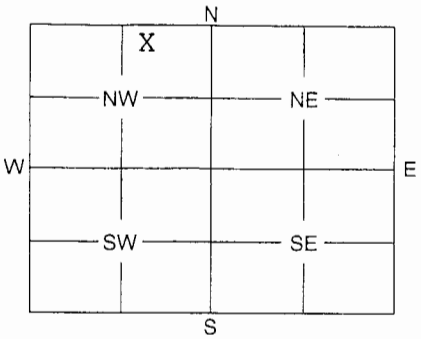
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Barton	NW¼ NE¼ NW¼	31	19 S	13 E/W

Distance and direction from nearest town or city street address of well if located within city?
912 MacArthur, Great Bend

2 WATER WELL OWNER: Gary Younger
912 MacArthur
RR #, St. Address, Box #:
City, State, ZIP Code : Great Bend, KS 67530

Board of Agriculture, Division of Water Resources Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL 19 ft.

WELL'S STATIC WATER LEVEL 15.89 ft.

WELL WAS USED AS:

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:

1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
(2) PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile .....

Blank casing diameter 2 in. Was casing pulled? Yes X No ..... If yes, how much 10'
Casing height above or below land surface n/a in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite (4) Other Native soil

Grout Plug Intervals: From 0 ft. to 3 ft., From 3 ft. to 20 ft., From ..... to ..... ft.

What is the nearest source of possible contamination:

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

Direction from well? ..... How many feet? .....

FROM	TO	PLUGGING MATERIALS
0	3	Native soil
3	20	Bentonite (8")

MW2

GeoCore #1251
KDHE #U6 005 00581

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/4/2005 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) 11/29/2005 under the business name of GeoCore Inc.
by (signature) [signature]

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.