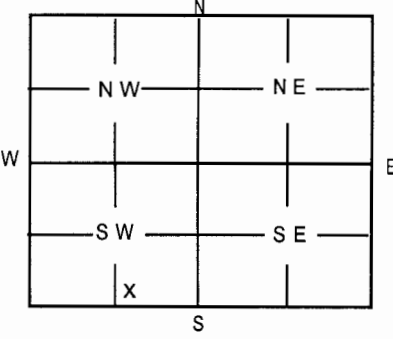
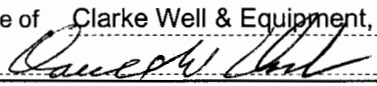


1	LOCATION OF WATER WELL: County: Barton	Fraction SW 1/4 SE 1/4 SW 1/4	Section Number 27	Township Number T 19 S	Range Number R 13 E																								
Distance and direction from nearest town or city street address of well if located within city? Approximately 370' east of the intersection of US HWY 56 and US 281 Bypass in Great Bend																													
2	WATER WELL OWNER: Smoky Hill, LLC RR#, St. Address, Box # 645 E. Crawford - Suite E1 City, State, ZIP Code Salina, KS 67401 Board of Agriculture, Division of Water Resources Application Number:																												
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 																												
4	DEPTH OF WELL 30 ft WELL'S STATIC WATER LEVEL 6.5 ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 <u>Dewatering</u> 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 ☒ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No ☒																												
5	TYPE OF BLANK CASING USED: 1 <u>Steel</u> 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter 16 in. Was casing pulled? Yes ☒ No _____ If yes, how much _____ Casing height above or below land surface _____ in.																												
6	GROUT PLUG MATERIAL: 1 Neat Cement 2 Cement grout 3 Bentonite 4 <u>Other</u> None Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 <u>Sewer lines</u> 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? South How many feet? 10																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:15%;">TO</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>The 16" casing was pulled with</td> </tr> <tr> <td></td> <td></td> <td>excavator. The borehole collapsed to a</td> </tr> <tr> <td></td> <td></td> <td>depth of approximately 8 feet. The void</td> </tr> <tr> <td></td> <td></td> <td>was filled with soil and compacted in</td> </tr> <tr> <td></td> <td></td> <td>place.</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS			The 16" casing was pulled with			excavator. The borehole collapsed to a			depth of approximately 8 feet. The void			was filled with soil and compacted in			place.						
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10-08-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 10-22-07 under the business name of Clarke Well & Equipment, Inc. by (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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.																													