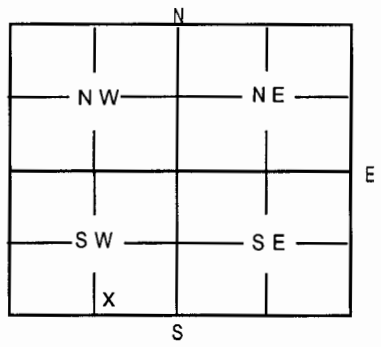
364 8859 WATER WELL PLUGGING RECORD Form WWC-5P KSA82a-1212 ID NO. Well #5

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Barton	SW 1/4 SE 1/4 SW 1/4	27	T 19 S	R 13 E (W)

Distance and direction from nearest town or city street address of well if located within city?
Approximately 410' 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 27 ft
WELL'S STATIC WATER LEVEL 6.5 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 ✓
If yes, mo/day/yr sample was submitted
Water Well Disinfected: Yes No ✓

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 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 Other) 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 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? South How many feet? 10

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.

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) [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.