

1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number
 County: Barton SW 1/4 SW 1/4 SE 1/4 28 19S 13W E/W
 Distance and direction from nearest town or city street address of well if located within city?
 1102 Kansas Avenue
 Great Bend, KS

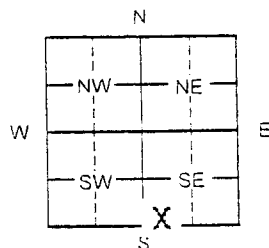
2 WATER WELL OWNER:

Highway Oil, Inc.
 RR#, St. Address, Box #:
 534 S. Kansas Ave., Suite 1200
 City, State, ZIP Code:
 Topeka KS 66603

Global Positioning System (decimal degrees, min. of 4 digits)

Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

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



4 DEPTH OF WELL 13.45 ft.

MWIR

WELL'S STATIC WATER LEVEL 9.12 ft

WELL WAS USED AS:

- | | | |
|--------------|----------------------------|-------------------|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring |
| 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

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 ___ No X If yes, how much _____
 Casing height above or below land surface 5.40 in. below

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soil, 0-3'

Grout Plug Intervals: From 0 ft. to 3 ft., From 3 ft. to 13.45 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 | Direction from well? |
| 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | How many feet? |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Soil			
3	13.45	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/23/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 6/8/07 under the business name of Larsen & Associates, Inc. by (signature) _____

INSTRUCTIONS: Please fill in blanks 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. Visit us at <http://www.kdheks.gov/waterwell>.