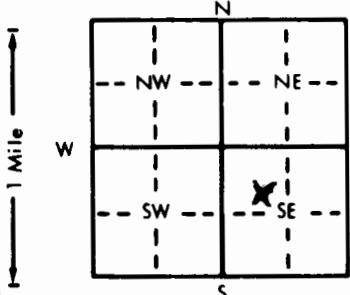


| | | | | | |
|---------------------------|----------------------|----------|----------------|-----------------|--------------|
| 1 LOCATION OF WATER WELL: | | Fraction | Section Number | Township Number | Range Number |
| County: McPherson | SW 1/4 NW 1/4 SE 1/4 | 29 | T 19 S | R 3 E W | |

Distance and direction from nearest town or city street address of well if located within city?
504 West Grant St. McPherson, Kansas

| | | | |
|---|---------------------------|-------------------------|---|
| 2 | WATER WELL OWNER: | Chemstar Products Co. | |
| | RR#, St. Address, Box # : | 503 West Grant St. | Board of Agriculture, Division of Water Resources |
| | City, State, ZIP Code : | McPherson, Kansas 67460 | Application Number: |

| | | | | | | | | | | |
|---|--|---|--|-----|---------|------------------|---|--|---|--|
| 3 | LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 | DEPTH OF COMPLETED WELL..... | 20' | ft. | ELEVATION: | | | | |
| | | | Depth(s) of Groundwater Encountered..... | 1 | Unknown | ft. | 2 | | 2 | |



4. DEPTH OF COMPLETED WELL.....20'.....ft. ELEVATION:.....
 Depth(s) Groundwater Encountered 1. Unknown.....ft. 2.ft. 3.ft.
 WELL'S STATIC WATER LEVEL.....ft. below land surface measured on mo/day/yr.....
 Pump test data: Well water was.....ft. after.....hours pumping.....gpm
 Est. Yield.....gpm: Well water was.....ft. after.....hours pumping.....gpm
 Bore Hole Diameter.....in. to.....ft., and.....in. to.....ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well.....
 Was a chemical/bacteriological sample submitted to Department? Yes.....No.....X.....; If yes, mo/day/yr sample was submitted.....
 Water Well Disinfected? Yes.....No.....

| | | | | |
|------------------------------|------------|-------------------|-------------------------|--|
| 5 TYPE OF BLANK CASING USED: | | 5 Wrought iron | 8 Concrete tile | CASING JOINTS: Glued Clamped |
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | 9 Other (specify below) | Welded |
| 2 PVC | 4 ABS | 7 Fiberglass | Clay Tile | Threaded |

Blank casing diameter . . . 8 in. to ft., Dia in. to ft., Dia in. to ft.
Casing height ^{Below} above land surface - 3' 6" in. weight lbs./ft. Wall thickness or gauge No. . . .

| | | | | |
|---|--------------------|-----------------|------------|------------------------------|
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | 7 PVC | 10 Asbestos-cement |
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 8 RMP (SR) | 11 Other (specify) |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 9 ABS | 12 None used (open hole) |

| | | | | |
|-------------------------------------|---------------|------------------|--------------------------|---------------------|
| SCREEN OR PERFORATION OPENINGS ARE: | | 5 Gauzed wrapped | 8 Saw cut | 11 None (open hole) |
| 1 Continuous slot | 3 Mill slot | 6 Wire wrapped | 9 Drilled holes | |
| 2 Louvered shutter | 4 Key punched | 7 Torch cut | 10 Other (specify) | |

| | | |
|------------------------------|--------------------------------------|-------------------------------------|
| SCREEN-PERFORATED INTERVALS: | From ft. to ft., | From ft. to ft. |
| | From ft. to ft., | From ft. to ft. |
| GRAVEL PACK INTERVALS: | From ft. to ft., | From ft. to ft. |
| | From ft. to ft., | From ft. to ft. |

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
Grout Intervals: From 3 ft to 80 ft From ft to ft From ft to ft

| | | | | |
|---|-----------------|-----------------|------------------------|--------------------------|
| What is the nearest source of possible contamination: | | | 10 Livestock pens | 14 Abandoned water well |
| 1 Septic tank | 4 Lateral lines | 7 Pit privy | 11 Fuel storage | 15 Oil well/Gas well |
| 2 Sewer lines | 5 Cess pool | 8 Sewage lagoon | 12 Fertilizer storage | 16 Other (specify below) |
| 3 Watertight sewer lines | 6 Seepage pit | 9 Feedyard | 13 Insecticide storage | |

Direction from well? _____ How many feet? _____

[illegible]

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) 12-20-1996 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. None This Water Well Record was completed on (mo/day/yr) 1-6-1997 under the business name of Board Of Public Utilities by signature Frank S. Halligan