1) LOCATION OF WATER WELL:

| County: McPherson | Fraction NE ¼ SE ¼ SW ¼ | Section Number 28 | Township Number T 19 S | Range Number R 4 (W) |

Distance and direction from nearest town or city street address of well if located within city?
Approx 6 miles West of McPherson on US Hwy 56

2) WATER WELL OWNER: Koch Industries
RR#, St. Address, Box# : Rt 2
City, State, ZIP Code : Conway, Kansas 67460

Board of Agriculture, Division of Water Resources
Application Number:

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

```
           N
     +----+----+
     | NW | NE |
  W  +----+----+  E
     | SW X| SE|
     +----+----+
           S
```
1 Mile

4) DEPTH OF COMPLETED WELL . . . . . 42 . . . . . ft. ELEVATION: . . . . . 999 . . . . .
Depth(s) Groundwater Encountered 1. . . . . 999 . . . . . ft. 2. . . . . . ft. 3. . . . . . ft.
WELL'S STATIC WATER LEVEL . . . 28.4 . . . ft. below land surface measured on mo/day/yr . . . 1/24/97 . . .
Pump test data: Well water was . . . NA . . . ft. after . . . . hours pumping . . . . . . gpm
Est. Yield . . NA . . gpm: Well water was . . . . . . ft. after . . . . hours pumping . . . . . . gpm
Bore Hole Diameter . . . . 8 . . . in. to . . . . . . 42.5 . . . . . 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.✓ . . . . . .; If yes, mo/day/yr sample was
submitted   Water Well Disinfected? Yes   No ✓
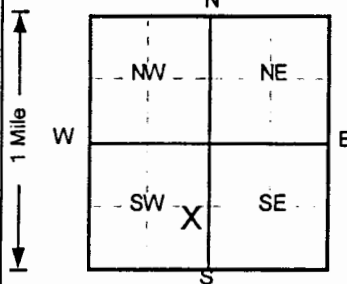
5) TYPE OF BLANK CASING USED: 5 Wrought iron   8 Concrete tile   CASING JOINTS: Glued . . . . . . Clamped . . . . .
1 Steel   3 RMP (SR)   6 Asbestos-Cement   9 Other (specify below)   Welded . . . .
(2) PVC   4 ABS   7 Fiberglass   Threaded. ✓ . . . .
Blank casing diameter . . . . . 2 . . . . . in. to . . . 22 . . . . ft, Dia . . . . . . in. to . . . . . ft, Dia . . . . in. to . . . . . . ft.
Casing height above land surface . . . . . . 24 . . . . . in., weight . . . . lbs./ft. Wall thickness or gauge No. . . . Sch. 40 . . . . .
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 . . . . . 22 . . . . . ft to . . . . . 42 . . . . . ft, From . . . . . . ft to . . . . . . ft
From . . . . . . ft to . . . . . . ft, From . . . . . . ft to . . . . . . ft
GRAVEL PACK INTERVALS: From . . . . . 16 . . . . . ft to . . . . . 42 . . . . . 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 . . . . . 0 . . . . ft to . . . . 13 . . . . ft, From . . . . 13 . . . . ft to . . . . 16 . . . . 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   . . . Gas Storage Field . . .
Direction from well?   How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	7.5	Clay, Dark Reddish Brown			
7.5	10	Clay, Brown			
10	15	Silt, Brown			
15	21	Silt, Tannish Brown			
21	32.5	Clay, Brown			
32.5	39	Clay, Reddish Brown			
39	42.5	Weathered Shale/Silt, Dark Reddish Brown			

CI-KOCH1-shallow , Abovegrade
Project Name: Wilson and Company-Conway
GeoCore # 452 , Wilson and Co. # 9342005002

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) . . . . 1/29/97 . . . . 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/yr) . . . . . 2/20/97 . . . . . .
under the business name of   **GeoCore Services, Inc.**   by (signature) _Dale Well_

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY   T   R   E/W   SEC.   %   %   %