

| <b>1 LOCATION OF WATER WELL:</b><br>County: <b>Barton</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Fraction<br><b>NE 1/4 NW 1/4 NE 1/4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Section Number<br><b>9</b> | Township Number<br><b>20</b> | Range Number<br><b>13</b> <b>EW</b> |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------|-------------------------------------|--------------------|-----------------------|------------------------|--------------------------|--------------------------|---------------------------|-----------------------|----------------------------|--------------------------|-----------------|------------------------|----------|-----------------|------------|-------------------------|--|-------------|-------------------|----------------------|--|--|--|--|--|--|-------------------------------------------------------------------------------------|--|
| Distance and direction from nearest town or city street address of well if located within city?<br><b>2 miles South of Great Bend on Highway 281</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| <b>2 WATER WELL OWNER:</b> <b>Venture Corporation</b><br><b>So. 281 Highway</b><br>RR #, St. Address, Box #: <b>Great Bend, KS 67530</b><br>City, State, ZIP Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| <b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b><br><div style="text-align: center;"> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>4 DEPTH OF WELL</b> <b>17</b> ft.<br><b>WELL'S STATIC WATER LEVEL</b> <b>64*</b> ft.<br><b>WELL WAS USED AS:</b><br><table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><b>10 Monitoring Well</b></td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> Was a chemical / bacteriological sample submitted to Department? Yes ..... No <b>X</b> .....<br>If yes, mo/day/yr sample was submitted .....<br>Water Well Disinfected: Yes ..... No <b>X</b> .. |                            |                              |                                     | 1 Domestic         | 5 Public Water Supply | 9 Dewatering           | 2 Irrigation             | 6 Oil Field Water Supply | <b>10 Monitoring Well</b> | 3 Feedlot             | 7 Domestic (Lawn & Garden) | 11 Injection Well        | 4 Industrial    | 8 Air Conditioning     | 12 Other |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| 1 Domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5 Public Water Supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 9 Dewatering               |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| 2 Irrigation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 6 Oil Field Water Supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>10 Monitoring Well</b>  |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| 3 Feedlot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 7 Domestic (Lawn & Garden)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 11 Injection Well          |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| 4 Industrial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 8 Air Conditioning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 12 Other                   |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| <b>5 TYPE OF BLANK CASING USED:</b><br><table style="width:100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td><b>2 PVC</b></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> Blank casing diameter <b>2</b> in. Was casing pulled? Yes <b>X</b> No ..... If yes, how much <b>2'</b> .....<br>Casing height above or below land surface <b>n/a</b> in.                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     | 1 Steel            | 3 RMP (SR)            | 5 Wrought              | 7 Fiberglass             | 9 Other (Specify below)  | <b>2 PVC</b>              | 4 ABS                 | 6 Asbestos-Cement          | 8 Concrete Tile          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 3 RMP (SR)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 5 Wrought                  | 7 Fiberglass                 | 9 Other (Specify below)             |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| <b>2 PVC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 4 ABS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 6 Asbestos-Cement          | 8 Concrete Tile              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| <b>6 GROUT PLUG MATERIAL:</b> 1 Neat cement 2 Cement grout <b>3 Bentonite</b> <b>4 Other Native soil</b><br>Grout Plug Intervals: From <b>0</b> ft. to <b>1</b> ft., From <b>1</b> ft. to <b>17</b> ft., From ..... to ..... ft.<br>What is the nearest source of possible contamination:<br><table style="width:100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td><b>11 Fuel storage</b></td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table> Direction from well? ..... How many feet? ..... |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     | 1 Septic tank      | 6 Seepage pit         | <b>11 Fuel storage</b> | 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 |  |  |  |  |  |  |                                                                                     |  |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 6 Seepage pit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>11 Fuel storage</b>     | 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       |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| <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>0</td> <td>1</td> <td>Native soil</td> </tr> <tr> <td>1</td> <td>17</td> <td>Bentonite (8")</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            | FROM                         | TO                                  | PLUGGING MATERIALS | 0                     | 1                      | Native soil              | 1                        | 17                        | Bentonite (8")        |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  | *Plug in casing at 1.16' BTOC.<br><br>MW8<br><br>GeoCore #315<br>KDHE #U6 005 00722 |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | TO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | PLUGGING MATERIALS         |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Native soil                |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Bentonite (8")             |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                              |                                     |                    |                       |                        |                          |                          |                           |                       |                            |                          |                 |                        |          |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |                                                                                     |  |

**7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) **1/3/2006** 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/year) **1/4/2006** under the business name of **GeoCore Inc.**  
 by (signature) *Jack Rohl*

**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, 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.