

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
County:	McPherson	NE $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$	4		20 S		3	E/W

Distance and direction from nearest town or city street address of well if located within city?

1591 Ironhorse Road, McPherson

2	WATER WELL OWNER: National Cooperative Refinery Assoc.	
	RR #, St. Address, Box #: 1391 Ironhorse Road	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code : McPherson, KS 67460	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 95 ft.											
		WELL'S STATIC WATER LEVEL 82 ft. WELL WAS USED AS: <table border="0"> <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>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	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
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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) • PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter 5 in. Was casing pulled? Yes No Casing height above or below land surface 20 in. If yes, how much		

6	GROUT PLUG MATERIAL: • Neat cement 2 Cement grout 3 Bentonite • Other ..Clay.....																					
	Grout Plug Intervals: From 0 ft. to 3 ft., From 3 ft. to 95 ft., From to ft.																					
What is the nearest source of possible contamination:																						
<table border="0"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</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>			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	
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Direction from well? How many feet?																						

FROM	TO	PLUGGING MATERIALS
0	3	Clay
3	95	Neat Cement (5")

*Casing removed to 3' bgs

ZL-06S

GeoCore #875

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/22/2006 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) 12/15/2006 under the business name of GeoCore Inc. by (signature) <i>[Signature]</i>	
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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.