

1 LOCATION OF WATER WELL: County: MITCHELL Fraction: NE 1/4 NW 1/4 NW 1/4 Section Number: 29 Township Number: T 8 S Range Number: R 10 EW

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

2 WATER WELL OWNER: FARMWAY COOP RR#, St. Address, Box #: WASHINGTON & DUFFALO City, State, ZIP Code: LIPTON, KS 67485 Board of Agriculture, Division of Water Resources Application Number: RW-6

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing a 36-acre section with an 'X' in the NW corner]

4 DEPTH OF COMPLETED WELL: 33 ft. ELEVATION: 1586.91 ft. WELL'S STATIC WATER LEVEL: DRY ft. below land surface measured on mo/day/yr: 5-11-95

5 TYPE OF BLANK CASING USED: 2 PVC, 4 ABS, 5 Wrought iron, 8 Concrete tile, 6 Asbestos-Cement, 9 Other (specify below), 7 Fiberglass, 10 Asbestos-cement, 11 Other (specify), 12 None used (open hole)

SCREEN OR PERFORATION MATERIAL: 7 PVC, 10 Asbestos-cement, 11 Other (specify), 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 6 Saw cut, 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From 18 ft. to 33 ft. GRAVEL PACK INTERVALS: From 16 ft. to 33 ft.

6 GROUT MATERIAL: 2 Cement grout, 3 Bentonite, 4 Other. Grout Intervals: From 0 ft. to 2 ft., From 2 ft. to 16 ft.

What is the nearest source of possible contamination: 11 Fuel storage, 14 Abandoned water well, 15 Oil well/Gas well, 16 Other (specify below)

Direction from well? NE How many feet? 100

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows include: 0-31 BRN LOESS TRACE CHALK, 31-32 WEA. OLIVE SHALE, 32-33 PK GRY SHALE

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) 5-15-95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 6-12-95 under the business name of AGD SERVICES by (signature) Guy C. Noefler

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.