

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Clay	NW 1/4 1/4 1/4	23	10	2 E

Distance and direction from nearest town or city street address of well if located within city?  
 8 miles east + 1/4 mile South from Longford

2 WATER WELL OWNER: **Bill Steenbock**  
 RR #, St. Address, Box #: **1063 4th Road**  
 City, State, ZIP Code: **Longford, KS 67458**  
 Board of Agriculture, Division of Water Resources  
 Application Number: \_\_\_\_\_

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

N			
X			
NW		NE	
SW		SE	
S			

4 DEPTH OF WELL ..... **72** ft  
 WELL'S STATIC WATER LEVEL ..... **14** ft.  
 WELL WAS USED AS:  
 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 .....

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)  
 2 PVC      4 ABS      6 Asbestos-Cement      8 Concrete Tile .....

Blank casing diameter ..... **60** in.      Was casing pulled? Yes  No .....      If yes, how much **5 ft**  
 Casing height above or below land surface ..... **60** in.      *put in well with subsoil*

6 GROUT PLUG MATERIAL: 1 Neat cement      2 Cement grout      3 Bentonite      4 Other .....

Grout Plug Intervals: From **72** ft. to **58** ft., From **58** ft. to **5** ft., From **5** ft. to **4.3** ft.  
*sand*      *subsoil + rock casing*      *Bentonite*      *(rest Topsoil)*

What is the nearest source of possible contamination:  
 1 Septic tank       6 Seepage pit       11 Fuel storage       16 Other (specify below) **Crop field**  
 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

Direction from well? **All directions**      How many feet? **20 feet**

FROM	TO	PLUGGING MATERIALS
72	58	Sand
58	5	subsoil + rock casing
5	4.3	bentonite
4.3	0	topsoil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **Oct 29 2002** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \_\_\_\_\_ This Water Well Record was completed on (mo/day/year) \_\_\_\_\_ under the business name of \_\_\_\_\_  
 by (signature) **Wilson R. Steenbock**

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: 785/296-3565. Send one to Water Well Owner and retain one for your records.