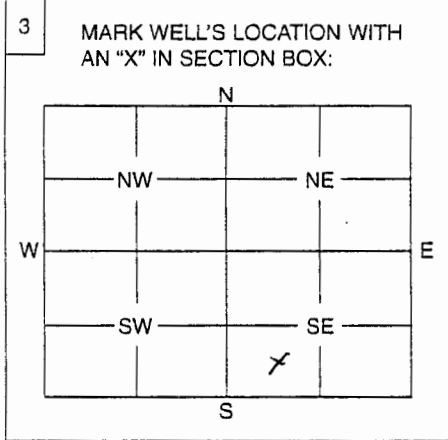


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<u>Riley</u>	$\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$	<u>7</u>	<u>10</u>	<u>8</u> EW

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

2	WATER WELL OWNER:	<u>Kansas State University</u>
RR #, St. Address, Box #:	<u>108 EDWARDS HALL</u>	Board of Agriculture, Division of Water Resources
City, State, ZIP Code :	<u>MANHATTAN, KANSAS</u>	Application Number:



4	DEPTH OF WELL	<u>40.5</u> ft.
	WELL'S STATIC WATER LEVEL	<u>NA</u> ft.
	WELL WAS USED AS:	
	1 Domestic	5 Public Water Supply
	2 Irrigation	6 Oil Field Water Supply
	3 Feedlot	7 Domestic (Lawn & Garden)
	4 Industrial	8 Air Conditioning
		9 Dewatering
		10 <u>Monitoring Well</u>
		11 Injection Well
		12 Other

Was a chemical / bacteriological sample submitted to Department? Yes No mw14
 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 <u>PVC</u> 4 ABS 6 Asbestos-Cement 8 Concrete Tile
	Blank casing diameter <u>2</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No If yes, how much <u>3 Ft</u>
	Casing height above or <u>below</u> land surface <u>60</u> in.

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 <u>Bentonite</u>	4 Other
	Grout Plug Intervals:	From <u>3</u> ft.	to <u>40.5</u> ft.,	From ft.	to ft., From to ft.
	What is the nearest source of possible contamination:				
	1 Septic tank	6 Seepage pit	11 Fuel storage	16 <u>Other (specify below)</u>	
	2 Sewer lines	7 Pit privy	12 Fertilizer storage	<u>LUST</u>	
	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? <u>WNW</u>	How many feet? <u>238</u>			

FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>3</u>	<u>Soil</u>
<u>3</u>	<u>40.5</u>	<u>Bentonite</u>

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>12/21/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>757</u> This Water Well Record was completed on (mo/day/year) <u>12/27/06</u> under the business name of <u>LARSEN + ASSOCIATES</u> by (signature) <u>[Signature]</u>
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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.