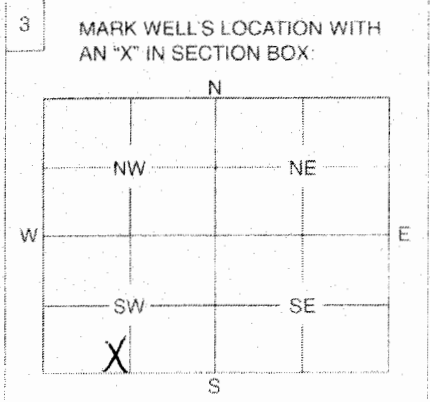


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Jefferson	SE $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$	18	11S	17E E/W

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

Highway 24, Grantville, Ks

2	WATER WELL OWNER:	Brummit Oil Co., Inc. (Presto Pantry) P.O. Box 705
	RR #, St. Address, Box #: City, State, ZIP Code	Leavenworth, KS 66048
	Board of Agriculture, Division of Water Resources Application Number:	



4	DEPTH OF WELL	42.2	ft.
	WELL'S STATIC WATER LEVEL	25.83	ft.
	WELL WAS USED AS:		
	1 Domestic	5 Public Water Supply	9 Dewatering
	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 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	<input checked="" type="checkbox"/>
	If yes, mo/day/yr sample was submitted		
	Water Well Disinfected: Yes	No	<input checked="" type="checkbox"/>

5	TYPE OF BLANK CASING USED:
	<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought <input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> 9 Other (Specify below) <input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 8 Concrete Tile
	Blank casing diameter 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes how much 3'
	Casing height above or below land surface _____ in.

6	GROUT PLUG MATERIAL:
	<input checked="" type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input checked="" type="checkbox"/> 4 Other Soil/asphalt
	Grout Plug Intervals: From 3 ft. to 42.2 ft. From 4 ft. to 3 ft. From 0 ft. to _____ ft.
	What is the nearest source of possible contamination:
	<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 11 Fuel storage <input checked="" type="checkbox"/> 16 Other (specify below) contaminated site <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 13 Insecticide storage <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 15 Oil well/Gas well
	Direction from well? _____ How many feet? _____

FROM	TO	PLUGGING MATERIALS
42.2	3	Bentonite
3	0	Soil/ASphalt

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 07/29/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/year) 08/29/08 under the business name of Associated Environmental, 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 circles, 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.