

*mw 89*

<b>1</b> LOCATION OF WATER WELL: County: <u>Nyandotte</u>	Fraction <u>SE NE SW NW</u> <div style="display: flex; justify-content: space-around; font-size: small;"> <span>1/4</span> <span>1/4</span> <span>1/4</span> </div>	Section Number <u>2</u>	Township Number <u>11 S</u>	Range Number <u>25</u> <u>EW</u>																											
Distance and direction from nearest town or city street address of well if located within city? <u>2029 Fairfax KS KS 66115</u>																															
<b>2</b> WATER WELL OWNER: <u>Conoco Phillips Company</u> RR #, St. Address, Box #: <u>1218 Phillips Bldg 420 S. Recker Ave</u> City, State, ZIP Code: <u>Barlesville OK 74004</u> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Board of Agriculture, Division of Water Resources</span> <span>Application Number:</span> </div>																															
<b>3</b> MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  <div style="text-align: center;">             N  <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px;">NW</td> <td style="width: 20px; text-align: center;">X</td> <td style="width: 20px;">NE</td> </tr> <tr> <td style="width: 20px;">W</td> <td style="width: 20px;"></td> <td style="width: 20px;">E</td> </tr> <tr> <td style="width: 20px;">SW</td> <td style="width: 20px;"></td> <td style="width: 20px;">SE</td> </tr> <tr> <td></td> <td style="text-align: center;">S</td> <td></td> </tr> </table> </div>	NW	X	NE	W		E	SW		SE		S		<b>4</b> DEPTH OF WELL <u>26.50</u> ft.  WELL'S STATIC WATER LEVEL _____ ft.  WELL WAS USED AS: <div style="display: flex; justify-content: space-between; font-size: small;"> <div>             1 Domestic              2 Irrigation              3 Feedlot              4 Industrial         </div> <div>             5 Public Water Supply              6 Oil Field Water Supply              7 Domestic (Lawn &amp; Garden)              8 Air Conditioning         </div> <div>             9 Dewatering  <input checked="" type="checkbox"/> 10 Monitoring Well              11 Injection Well              12 Other _____         </div> </div> <p>Was a chemical / bacteriological sample submitted to Department? Yes _____ No <u>✓</u>          If yes, mo/day/yr sample was submitted _____</p> <p>Water Well Disinfected: Yes _____ No <u>✓</u></p>																		
NW	X	NE																													
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SW		SE																													
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<b>5</b> TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between; font-size: small;"> <div>             1 Steel  <input checked="" type="checkbox"/> 2 PVC         </div> <div>             3 RMP (SR)              4 ABS         </div> <div>             5 Wrought              6 Asbestos-Cement         </div> <div>             7 Fiberglass              8 Concrete Tile         </div> <div>             9 Other (Specify below) _____         </div> </div> <p>Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>✓</u> No _____ If yes, how much <u>19</u> in.          Casing height above or below land surface <u>26.50</u> in.</p>																															
<b>6</b> GROUT PLUG MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other _____ Grout Plug Intervals: From <u>26.50</u> ft. to <u>0</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between; font-size: small;"> <div>             1 Septic tank              2 Sewer lines              3 Watertight sewer lines              4 Lateral lines              5 Cess pool         </div> <div>             6 Seepage pit              7 Pit privy              8 Sewage lagoon              9 Feedyard              10 Livestock pens         </div> <div>             11 Fuel storage              12 Fertilizer storage              13 Insecticide storage              14 Abandoned water well              15 Oil well/Gas well         </div> <div>             16 Other (specify below) _____         </div> </div> <p>Direction from well? _____ How many feet? _____</p>																															
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:15%;">TO</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>26.50</u></td> <td><u>0</u></td> <td><u>Cement Grout</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	PLUGGING MATERIALS	<u>26.50</u>	<u>0</u>	<u>Cement Grout</u>																					
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<b>7</b> CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>11-20-04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>707</u> This Water Well Record was completed on (mo/day/year) <u>1-11-05</u> under the business name of <u>MAXS</u> by (signature) <u>David Bump</u>																															
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.																															