

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Geary	SE ¼ NW ¼ SE ¼	35	11	5E

Distance and direction from nearest town or city street address of well if located within city?
North Side of East Hwy 57/ North of City Water Plant

2 WATER WELL OWNER: Republican River Independent Park	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # PO Box 1876	
City, State, ZIP Code : Junction City, KS 66441	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 22.7 ft.																						
<div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px;"></td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="width: 50px; height: 50px;"></td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">X E</td> </tr> <tr> <td style="text-align: center;">S</td> <td></td> </tr> </table> <div style="text-align: center;">W E</div>			NW	NE			SW	X E	S		WELL'S STATIC WATER LEVEL 22.48 ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>(12) Other Vapor Extraction</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	(12) Other Vapor Extraction
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	Was a chemical/bacteriological sample submitted to Department? Yes _____ No X																						
	If yes, mo/day/yr sample was submitted _____																						
	Water Well Disinfected: Yes _____ No X																						

5 TYPE OF BLANK CASING USED:				
1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
(2) PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
Blank casing diameter 4 in.		Was casing pulled? Yes X No _____ If yes, how much 23 feet Overdrilled to 20 feet		
Casing height above or below land surface 0 in.				

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite 4 Other _____				
Grout Plug Intervals From 3 ft. to 22.7 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	
2 Sewer lines	7 Pit privy	12 Fertilizer storage	Contaminated Site	
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? _____ How many feet? _____				

FROM	TO	CODE	PLUGGING MATERIALS
0	3		Previously Existing Material
3	22.7		Bentonite

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 3-8-06 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) 3-20-06 under the business name of Woofert Pump & Well, Inc. by (signature) _____
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.