

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<i>Wabaunsee</i>	<i>NE 1/4 1/4 1/4</i>	<i>34</i>	<i>12</i>	<i>10</i>

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

2	WATER WELL OWNER: <i>Delmar Maite</i>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <i>RR2 Box 9 D</i>	Application Number:
	City, State, ZIP Code: <i>Alma, KS 66401</i>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <i>40' 2"</i> ft												
			WELL'S STATIC WATER LEVEL <i>20'</i> ft.												
			WELL WAS USED AS:												
			<table border="0"> <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 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other <i>Livestock</i></td> </tr> </table>	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 <i>Livestock</i>
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			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 <input checked="" type="checkbox"/> No												

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

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="radio"/> 3 Bentonite	4 Other
	GROUT PLUG INTERVALS:	From <i>40' 2"</i> ft.	to <i>36' 5"</i> 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 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard <input checked="" type="radio"/> 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well				
	Direction from well? <i>west</i> How many feet? <i>200'</i>				

FROM	TO	PLUGGING MATERIALS
<i>40' 2"</i>	<i>36' 5"</i>	<i>Bentonite</i>
<i>36' 5"</i>	<i>20' 5"</i>	<i>fill dirt</i>
<i>20' 5"</i>	<i>bottom</i>	<i>sand</i>
		<i>clay</i>
		<i>dirt from 3 1/2' below 40' 2"</i>
		<i>to top over bentonite plug</i>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 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)
	by (signature) <i>Delmar Maite</i>

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.