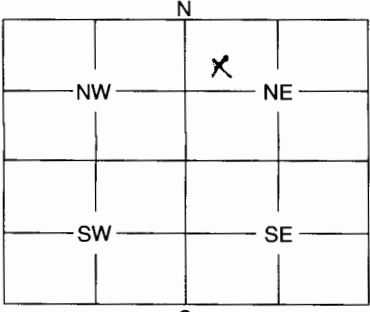


1 LOCATION OF WATER WELL: Fraction NE Section Number 16 Township Number 12 Range Number 10 E/W  
 County: WABAYUSEE 1/4 1/4 1/4

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

MILE WEST OF ALMA

2 WATER WELL OWNER: EILEEN UMBEHR  
 RR #, St. Address, Box #: 29268 OLD K18 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : ALMA, KS 66401 Application Number: \_\_\_\_\_

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  


4 DEPTH OF WELL 23 ft.  
 WELL'S STATIC WATER LEVEL 11.5 ft.  
 WELL WAS USED AS:  
 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 \_\_\_\_\_  
 Was a chemical / bacteriological sample submitted to Department? Yes \_\_\_\_\_ No X  
 If yes, mo/day/yr sample was submitted \_\_\_\_\_  
 Water Well Disinfected: Yes X No \_\_\_\_\_

5 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)  
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile \_\_\_\_\_  
 Blank casing diameter \_\_\_\_\_ in. Was casing pulled? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how much \_\_\_\_\_  
 Casing height above or below land surface \_\_\_\_\_ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_  
 Grout Plug Intervals: From 3.5 ft. to 4 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 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 14 Abandoned water well  
 5 Cess pool 10 Livestock pens 15 Oil well/Gas well  
 Direction from well? NE How many feet? 150

FROM	TO	PLUGGING MATERIALS
0	3.5	TOP SOIL
3.5	4.00	BENTONITE
4.00	11.5	SUB SOIL
11.5	23	GRAVEL SAND

7 CONTRACTOR'S OF 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) \_\_\_\_\_  
 \_\_\_\_\_ under the business name of Frank's Plumbing & Heating, Inc.  
 by (signature) Don T. [Signature]

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.