

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Wabaunsee</u>	<u>NE 1/4 NW 1/4 SE 1/4</u>	<u>26</u>	<u>12</u>	<u>12</u> E

Distance and direction from nearest town or city street address of well if located within city?
1 1/2 Miles North & 1/2 mile West of Keene

2 WATER WELL OWNER: Ed Peden
 RR #, St. Address, Box #: Box 4 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : 8 Dover, Ks. 66420 Application Number:

3 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;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">NW</td> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">NE</td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">X</td> <td style="width: 20px;"></td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">SW</td> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">SE</td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> W E S </div>						NW		NE							X			SW		SE													4 DEPTH OF WELL <u>.180</u> ft WELL'S STATIC WATER LEVEL <u>15</u> 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 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> Was a chemical / bacteriological sample submitted to Department? Yes No <u>x</u> If yes, mo/day/yr sample was submitted	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
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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 5..... in. Was casing pulled? Yes No x..... If yes, how much

Casing height above or below land surface 24..... in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 0..... ft. to 180 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 <u>Sewage lagoon</u>	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? North..... How many feet? 200.....

FROM	TO	PLUGGING MATERIALS
0	180	<u>Cement Grout</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-12-05..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 182..... This Water Well Record was completed on (mo/day/year) 7-15-05..... under the business name of Strader Drlg. Co., Inc.....
 C by (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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.