

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Dickinson	1/4 NW 1/4 NE 1/4 SE	23	13	1 EW

Distance and direction from nearest town or city street address of well if located within city?
 5 mi. West of Abilene, KS

2	WATER WELL OWNER: Dickinson County RWD #2	WELL #2 (West Well)
RR #, St. Address, Box #:	Abilene, KS. 67410	Board of Agriculture, Division of Water Resources
City, State, ZIP Code :		Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 40' 6" ft. <u>GROUND LEVEL</u>
		WELL'S STATIC WATER LEVEL 28' ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 <u>Public Water Supply</u> 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other	
Was a chemical / bacteriological sample submitted to Department? Yes No <u>X</u> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes <u>X</u> No			

5	TYPE OF BLANK CASING USED:
1 <u>Steel</u> 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter 12 in. Was casing pulled? Yes No <u>X</u> If yes, how much Casing height above or below land surface 48 in.	

6	GROUT PLUG MATERIAL:	1 Neat cement	2 <u>Cement grout</u>	3 <u>Bentonite</u>	4 Other
Grout Plug Intervals: From 4 ft. to 30 ft., From 30 ft. to 37 ft., From to ft.					
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 <u>Other (specify below)</u> 2 Sewer lines 7 Pit privy 12 Fertilizer storage <u>RIVER</u> 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? <u>North</u> How many feet? <u>150'</u>					

FROM	TO	PLUGGING MATERIALS
0	4	Top Soil
4	30	Concrete
30	37	Bentonite (Hole Plug)
37	40' 6"	Chlorinated Gravel

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9-9-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/year) 9-9-09 under the business name of Peterson Irrigation by (signature) Mike Peterson
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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.