

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Dickinson	SWS E SW	9	13	2 CEW

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

509 NE 14th St., Abilene

2	WATER WELL OWNER:	Robson Oil	MWI
RR #, St. Address, Box #:	PO Box 694	Board of Agriculture, Division of Water Resources	Application Number:
City, State, ZIP Code :	Abilene, KS 67410		

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 19.5 ft.
		WELL'S STATIC WATER LEVEL 18.85 ft.	
		WELL WAS USED AS:	
		1 Domestic	5 Public Water Supply
		2 Irrigation	6 Oil Field Water Supply
		3 Feedlot	7 Domestic (Lawn & Garden)
		4 Industrial	8 Air Conditioning
			9 Dewatering
			10 Monitoring Well
			11 Injection Well
			12 Other

Was a chemical / bacteriological sample submitted to Department? Yes No
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No

5	TYPE OF BLANK CASING USED:
1 Steel	3 RMP (SR)
2 PVC	4 ABS
5 Wrought	6 Asbestos-Cement
7 Fiberglass	8 Concrete Tile
9 Other (Specify below)	

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 19.5
 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 19.5 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? How many feet?					

FROM	TO	PLUGGING MATERIALS
0	3	Soil
3	19.5	Seal

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/18/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 7/15/05 under the business name of Larsen + Associates, Inc. by (signature) Kelly M. Brown
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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.