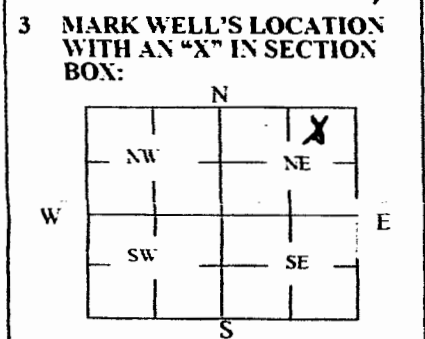


1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 Section Number 9 Township Number T 14 S Range Number 3 E W
 County: DILLON
 Street/Rural Address of Well Location: if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
1/2 mile south of 1/2 mile East
Global Positioning Systems (GPS) information:
 Latitude: N 38° 51.352 (in decimal degrees)
 Longitude: W 097° 05.684 (in decimal degrees)
 Elevation: 1222
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method: GPS unit (Make/Model: Garmin E-Trex 20)
 Digital Map-Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: MARK E NUSCHAFER
 RR#, St. Address, Box #: 1569 1800 AVG.
 City, State ZIP Code: ENTICHELL, MS 38741



4 DEPTH OF WELL 63 ft.
WELL'S STATIC WATER LEVEL 90 ft.
WELL WAS USED AS:
 Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other _____
 Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile WAS GALV STEEL PIPE
 Blank casing diameter 5" in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface CUT OFF 3' BELOW GROUND

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Plug Intervals: From 3 ft. to 40 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: NONE CLOSE
 Septic tank Seepage pit Fuel storage Other (specify below) _____
 Sewer lines Pit privy Fertilizer storage _____
 Watertight sewer lines Sewage lagoon Insecticide storage _____
 Lateral lines Feedyard Abandoned water well Direction from well? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	COMPACTED CLAY			
3	40	BENTONITE			
40	63	CHLORINATED W/4 GRAVEL			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/16/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 451. This Water Well Record was completed on (mo/day/year) 11/18/2017 under the business name of Halkman Well Drilling by (signature) Clayton GWD/PJ

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.