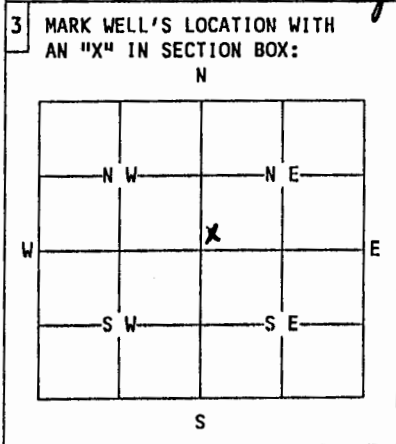


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	DICKINSON	SW 1/4 NE 1/4 SW 1/4	24	14	4

Distance and direction from nearest town or city street address of well if located within city?  
 one mile east, one and one half mile north, of Woodbine, KS.

2 WATER WELL OWNER: **Wayne Knopp**  
 RR#, St. Address, Box #: **1771 Trail Rd** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **Chapman, KS 67431** Application Number:



4 DEPTH OF WELL.....**32**.....ft.  
 WELL'S STATIC WATER LEVEL...**17**.....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 Lawn and Garden Only    11 Injection Well  
 4 Industrial    8 Air Conditioning    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)    5 Wrought    7 Fiberglass    9 Other (specify below)  
 2 PVC    4 ABS    6 Asbestos-Cement    8 Concrete Tile  
 Blank casing diameter...**6**.....in.    Was casing pulled? Yes..... No.  If yes, how much.....  
 Casing height above or below land surface...**84**.....in.

6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout     3 Bentonite    4 Other.....  
 Grout Plug Intervals: From.....ft. to.....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? **1850**.....

FROM	TO	PLUGGING MATERIALS
0	6	Topsoil
6	10	Bentonite
10	17	Clay
17	32	gravel

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **4-26-96**..... 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 .....  
 by (signature) **Wayne J. Knopp**.....

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send ~~up~~ three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.