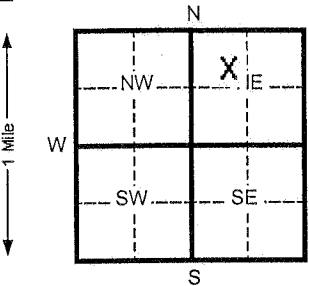


1 LOCATION OF WATER WELL: County: Wabaunsee	Fraction SE ¼ NW ¼ NE ¼	Section Number 2	Township Number T 14 S	Range Number R 8 E
Distance and direction from nearest town or city street address of well if located within city? 719 Logan St., Alta Vista, KS				
2 WATER WELL OWNER: KDHE-BER UST (Abandoned UST, Alta Vista) RR#, St. Address, Box # : 1000 SW Jackson; Suite 410 City, State, ZIP Code : Topeka, KS 66612 Board of Agriculture, Division of Water Resources Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL 50 ft. ELEVATION: 1451.49 Depth(s) Groundwater Encountered 1.5 ft. 2 ft. 3 ft. Ft. WELL'S STATIC WATER LEVEL 40 ft. below land surface measured on mo/day/yr 06/11/13 Pump test data: Well water was _____ Ft. after _____ hours pumping _____ Gpm Est. Yield _____ Gpm: Well water was _____ Ft. after _____ Hours pumping _____ Gpm Bore Hole Diameter 6.5 in. to 50 ft. and _____ in. to _____ Ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well MW-13 Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was Submitted _____ Water Well Disinfected? Yes _____ No X		
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) _____ Welded _____ 7 Fiberglass _____ Threaded X Blank casing diameter 2 in. to 25 Ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface FLUSH in., weight SCH 40 Lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) _____ SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 25 ft. to 50 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. SAND PACK INTERVALS: From 23 ft. to 50 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout intervals From 2 0.5 ft. to 21 Ft. From 3 21 Ft. to 23 ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) Contaminated Site Direction from well? _____ How many feet? _____				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was Completed on (mo/day/yr) 06/10/13 And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 07/08/13 under the business name of Associated Environmental, Inc. By (signature) Bradley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.				

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