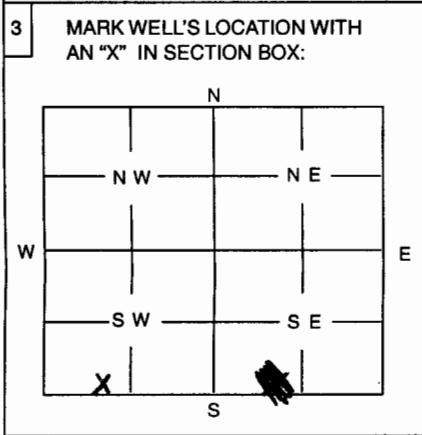


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>Saline Co</u>	<u>SW 1/4 NW 1/4 SW 1/4</u>	<u>1</u>	<u>15</u>	<u>5</u>

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

2 WATER WELL OWNER: Allan D Jensen
 RR #, St. Address, Box #: 3401 S. Wyman Rd Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Brookville KS 67425 Application Number:



4 DEPTH OF WELL 16 ft
 WELL'S STATIC WATER LEVEL 4 ft ~~12~~ pumped down
 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 Domestic (Lawn & Garden) 11 Injection Well
 4 Industrial 8 Air Conditioning 12 Other live stock

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

Water Well Disinfected: Yes X 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 Rock

Blank casing diameter in. Was casing pulled? Yes No — If yes, how much

Casing height above or below land surface in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 5 ft. to 4.5 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

4 Lateral lines 8 Sewage lagoon 13 Insecticide storage

5 Cess Pool 9 Feedyard 14 Abandoned water well

10 Livestock pens 15 Oil well/Gas well

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
16 Ft	7 Ft	CH10 graded sand
7 Ft	5 Ft	sub soil
5 Ft	4.5 Ft	Bentonite
4.5 Ft	0 Ft	Top Soil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3-8-08 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) Allan D Jensen

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.