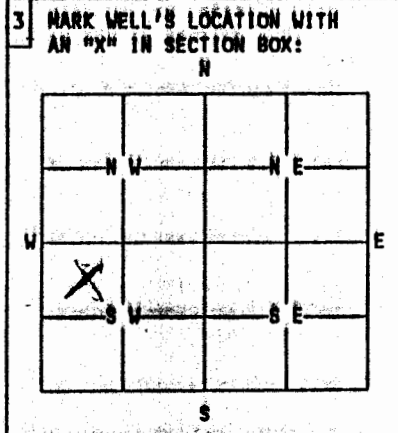


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Dickinson</u>	<u>SW 1/4 1/4 1/4</u>	<u>1</u>	<u>16</u>	<u>2 E</u>

Distance and direction from nearest town or city street address of well if located within city?  
3 miles East of Elmo, 1/4 north

2 WATER WELL OWNER: Ray Landow  
 RR#, St. Address, Box #: 1105 Hawk RD Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Abilene, Kans 67410 Application Number:



4 DEPTH OF WELL.....3.5.....ft.  
 WELL'S STATIC WATER LEVEL.....8.....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 Injecting Well  
 4 Industrial    8 Air Conditioning        12 Other Swatank...

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.....

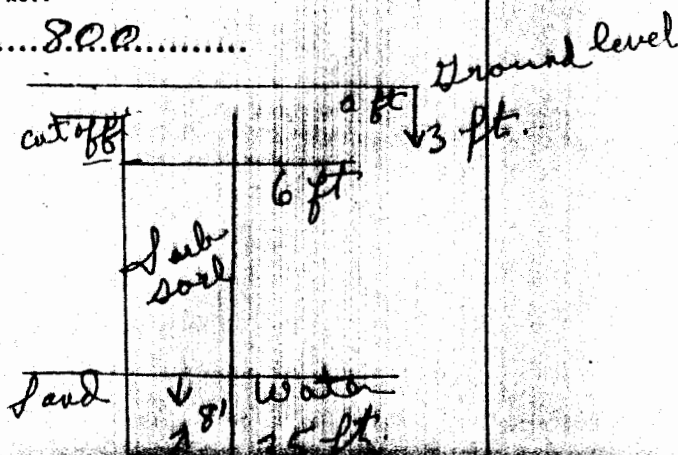
5 TYPE OF BLANK CASING USED:  
 Steel    3 RMP (SR)    5 Wrought      7 Fiberglass      9 Other (specify below)  
 PVC      4 ABS        6 Asbestos-Cement   8 Concrete Tile

Blank casing diameter.....6.....in.    Was casing pulled? Yes..... No X. If yes, how much.....  
 Casing height above or below land surface.....36.....in.

6 GROUT PLUG MATERIAL: 1 Neat cement     Cement grout    3 Bentonite    4 Other.....  
 Grout Plug Intervals: From...0...ft. to...3...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? ....West.....      How many feet? ....800.....

FROM	TO	PLUGGING MATERIALS
<u>35</u>	<u>27</u>	<u>Washed Disinfected Sand</u>
<u>27</u>	<u>6</u>	<u>Sub Soil</u>
<u>6</u>	<u>3</u>	<u>Cement Plug</u>
<u>3</u>	<u>0</u>	<u>Cut off of Bank Fill</u>



7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year).....4/19/94 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).....Ray Landow

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send ~~two~~ 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.