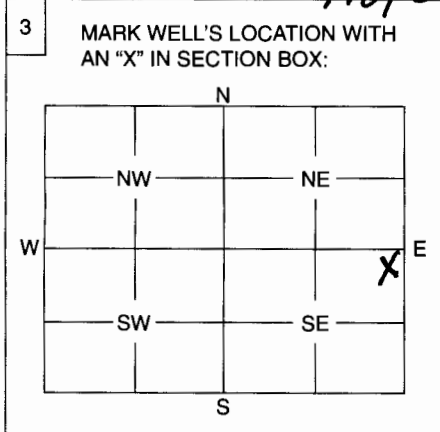


| | | | | |
|---------------------------|-----------------------------|----------------|-----------------|--|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: <u>Dickinson</u> | <u>NE 1/4 NE 1/4 SE 1/4</u> | <u>16</u> | <u>16</u> | <u>3</u> E/W |

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

2 WATER WELL OWNER: Neil Pollock
 RR #, St. Address, Box #: 1584 400 Ave
 City, State, ZIP Code: Hope, KS 67451 Board of Agriculture, Division of Water Resources
 Application Number: _____



4 DEPTH OF WELL 30 ft.
 WELL'S STATIC WATER LEVEL 15 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 Domestic (Lawn & Garden) 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 | <input checked="" type="checkbox"/> 9 Other (Specify below) <u>rock lined</u> |
| 2 PVC | 4 ABS | 6 Asbestos-Cement | 8 Concrete Tile | |

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:

| | | | |
|---|-------------------|-------------------------|--------------------------|
| <input checked="" type="checkbox"/> 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? East How many feet? 40

| FROM | TO | PLUGGING MATERIALS |
|------------|------------|----------------------|
| <u>30'</u> | <u>15'</u> | <u>course gravel</u> |
| <u>15'</u> | <u>5'</u> | <u>subsoil</u> |
| <u>5'</u> | <u>4.5</u> | <u>bentonite</u> |
| <u>4.5</u> | <u>0</u> | <u>topsoil</u> |
| | | |
| | | |

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12-10-11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 1-18-12 This Water Well Record was completed on (mo/day/year) under the business name of by (signature) Neil Pollock

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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.