

1 LOCATION OF WATER WELL: County: Marion	Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>	Section Number 17	Township Number 17	Range Number 4E
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Distance and direction from nearest town or city street address of well if located within city?
3 miles east, and 1 mile south of Ramona, Kansas

2 WATER WELL OWNER: Scully Estates Lmt'd Partnership RR#, St. Address, Box #: 114 S. Freeman, Bx 199 Board of Agriculture, Division of Water Resources City, State, ZIP Code : Marion, Kansas 66861 Application Number:	4 DEPTH OF WELL..... <u>8</u>ft. WELL'S STATIC WATER LEVEL.....ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> <u>1 Domestic</u> 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden Only 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other..... </div> </div> Was a chemical/bacteriological sample submitted to Department? Yes....No. <u>X</u> .. If yes, mo/day/yr sample was submitted..... Water Well Disinfected: Yes..... No. <u>X</u> ..
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

			X		
N	W		N	E	
W				E	
	S	W		S	E

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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 .. <u>Hand Dug</u> ... <u>36" Diameter</u> ..	Blank casing diameter.....in. Was casing pulled? Yes..... No..... If yes, how much..... Casing height above or below land surface.....in.
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6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other.....	Grout Plug Intervals: From <u>8'</u> ft. to <u>5'</u> ft., From.....ft. toft., From..... to.....ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> 16 Other (specify below) <u>Chapland</u>..... </div> </div> Direction from well? .. <u>West</u> How many feet? .. <u>1300'</u>
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FROM	TO	PLUGGING MATERIALS
8'	5'	Bentonite & sand.
5'	0'	Topsoil and clay.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)..... <u>11-17-94</u> 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) <u>11-28-94</u> under the business name of <u>Scully Estates</u> by (signature) .. <u>Randy Scully, Agent</u>
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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.