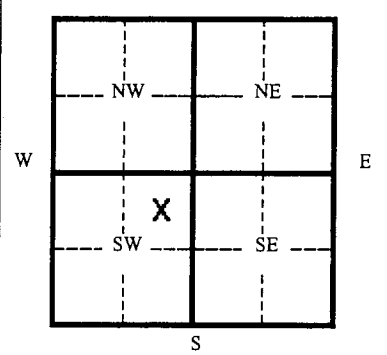


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Marion	$\frac{1}{4}$ NE $\frac{1}{4}$ SW $\frac{1}{4}$	26	19	3 E

Distance and direction from nearest town or city street address of well if located within city?
2.5 miles W & 1 mile N of Marion

2 WATER WELL OWNER:	Bisbee Oil & Gas	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #	1600 Dora	Application Number:
City, State, ZIP Code :	Kansas City, MO 64106	

3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL	27.4	ft.
WELL'S STATIC WATER LEVEL	4.0	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 (domestic)	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other
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	7 Fiberglass	9 Other (specify below)
	2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
Blank casing diameter	2	in.	Was casing pulled?	Yes X	No _____
			If yes, how much	3.6 ft.	
Casing height above or below and surface	43.2	in.			

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Plug Intervals	From 3 ft. to 27.4 ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. 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? _____ How many feet? _____

FROM	TO	CODE	PLUGGING MATERIALS
0	3		Soil
3	27.4		Bentonite

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:	This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 7/18/03 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 7/18/03 under the business name of Geotechnical Services, Inc.		
by (signature)	<i>[Signature]</i>		

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.