

1	LOCATION OF WATER WELL: County: <u>Washington</u>	Fraction <u>road ditch 1/4</u>	Section Number <u>20 15 1E</u>	Township Number <u>1S</u>	Range Number <u>1E</u>
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Distance and direction from nearest town or city street address of well if located within city?  
~~several miles from any town-closest is Haddam 8 mi SE or Mahaska 2 miles north~~

2 WATER WELL OWNER: Washington Co. Public Works Dept.  
 RR#, St. Address, Box # 1561 Rainbow Road Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code Washington, KS 66508 Application Number:

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

	N	W		N	E
W					E
	S	W		S	E
					X
					S

4 DEPTH OF WELL.....17.....ft.  
 WELL'S STATIC WATER LEVEL.no water.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 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.X... No....No water, but for safety reasons.

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.....52".....in. Was casing pulled? Yes..... No...X... If yes, how much.....  
 Casing height above or below land surface...chipped in - about 3'

6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout     3 Bentonite    4 Other.....  
 Grout Plug Intervals: From..1..ft. to..1/2..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    .. County Road .....

Direction from well? ..east.....    How many feet? 2'.....

FROM	TO	PLUGGING MATERIALS
17'	17'	disinfected sand-no water present
16'	1'	clay soil
1'	1/2'	bentonite plug
1/2'	0'	topsoil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/24/97..... 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) 6/6/97..... under the business name of Washington Co. Conservation District by (signature) Marlene Hamm - NPS Coordinator.....

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.