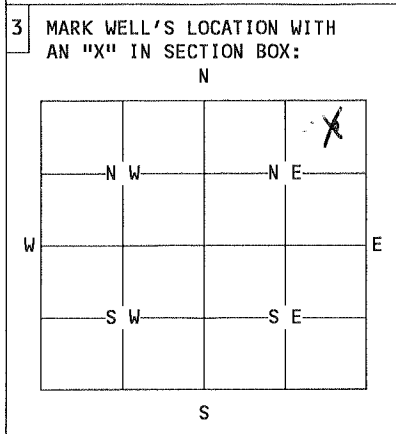


1	LOCATION OF WATER WELL: County: <u>Lyon</u>	Fraction <u>NE 1/4 1/4 1/4</u>	Section Number <u>03</u>	Township Number <u>20</u>	Range Number <u>13</u>
---	--	-----------------------------------	-----------------------------	------------------------------	---------------------------

Distance and direction from nearest town or city street address of well if located within city?
2.5 miles south Neosho Rapids

2 WATER WELL OWNER: Merle Sayre
RR#, St. Address, Box #: 2279 Road 130 Board of Agriculture, Division of Water Resources
City, State, ZIP Code: Neosho Rapids, KS 66864 Application Number:



4 DEPTH OF WELL.....30.....ft.
WELL'S STATIC WATER LEVEL.....28.....ft.

WELL WAS USED AS:

<input checked="" type="radio"/> 1 Domestic	<input type="radio"/> 5 Public Water Supply	<input type="radio"/> 9 Dewatering
<input type="radio"/> 2 Irrigation	<input type="radio"/> 6 Oil Field Water Supply	<input type="radio"/> 10 Monitoring Well
<input type="radio"/> 3 Feedlot	<input type="radio"/> 7 Lawn and Garden Only	<input type="radio"/> 11 Injection Well
<input type="radio"/> 4 Industrial	<input type="radio"/> 8 Air Conditioning	<input type="radio"/> 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:

<input type="radio"/> 1 Steel	<input type="radio"/> 3 RMP (SR)	<input type="radio"/> 5 Wrought	<input type="radio"/> 7 Fiberglass	<input checked="" type="radio"/> Other (specify below)
<input type="radio"/> 2 PVC	<input type="radio"/> 4 ABS	<input type="radio"/> 6 Asbestos-Cement	<input type="radio"/> 8 Concrete Tile	<u>Rock..... 3" diameter</u>

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

(Note: Other casing types are circled: Hand-Dug, Rock, 3" diameter.)

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....

Grout Plug Intervals: From 30 ft. to 20 ft., From 20 ft. to surface ft., From..... to.....ft.
(Note: gravel is written under 30 ft. and dirt & bentonite under 20 ft.)

What is the nearest source of possible contamination:

<input type="radio"/> 1 Septic tank	<input type="radio"/> 6 Seepage pit	<input type="radio"/> 11 Fuel storage	<input checked="" type="radio"/> Other (specify below)
<input type="radio"/> 2 Sewer lines	<input type="radio"/> 7 Pit privy	<input type="radio"/> 12 Fertilizer storage
<input type="radio"/> 3 Watertight sewer lines	<input type="radio"/> 8 Sewage lagoon	<input type="radio"/> 13 Insecticide storage	<u>pesticides used</u>
<input type="radio"/> 4 Lateral lines	<input type="radio"/> 9 Feedyard	<input type="radio"/> 14 Abandoned water well	<u>around house</u>
<input type="radio"/> 5 Cess Pool	<input type="radio"/> 10 Livestock pens	<input type="radio"/> 15 Oil well/Gas well

Direction from well? West..... How many feet? 10'.....

FROM	TO	PLUGGING MATERIALS
<u>30</u>	<u>20</u>	<u>gravel</u>
<u>20</u>	<u>surface</u>	<u>dirt & bentonite</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) Apr 1, 1987 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 1723197 This Water Well Record was completed on (mo/day/year) Apr 1, 1987 under the business name of Lyon Co. Health Dept. by (signature) Merle Sayre

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.