

1	LOCATION OF WATER WELL: County: <u>Linn</u>	Fraction <u>S 1/4 S 1/4 NW 1/4</u>	Section Number <u>23</u>	Township Number <u>20</u>	Range Number <u>23 E</u>																								
Distance and direction from nearest town or city street address of well if located within city? <u>1 mi. W. 2 mi. S. 2 mi. W. of LaCygne, Kansas 66040</u>																													
2	WATER WELL OWNER: <u>Clayton Carothers</u>																												
RR#, St. Address, Box #: <u>RR 2 Box 141</u>			Board of Agriculture, Division of Water Resources																										
City, State, ZIP Code : <u>LaCygne, KS 66040</u>			Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; height:100px; text-align: center; border-collapse: collapse;"> <tr><td colspan="2">N W</td><td colspan="2">N E</td></tr> <tr><td>W X</td><td></td><td></td><td>E</td></tr> <tr><td colspan="2">S W</td><td colspan="2">S E</td></tr> </table> S		N W		N E		W X			E	S W		S E		4 DEPTH OF WELL..... <u>6</u>ft. WELL'S STATIC WATER LEVEL.... <u>5.25</u>ft. WELL WAS USED AS: <table style="width:100%;"> <tr><td>① Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr> <tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr> <tr><td>3 Feedlot</td><td>7 Lawn and Garden Only</td><td>11 Injection Well</td></tr> <tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other.....</td></tr> </table> 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. <u>X</u> ... No.....			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.....
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5	TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) <u>2 PVC</u> 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter..... <u>5</u>in. Was casing pulled? Yes..... No..... If yes, how much..... Casing height above or below land surface..... <u>12</u>in.																												
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other..... Grout Plug Intervals: From <u>1</u> ..ft. to <u>1.5</u> ..ft., From.....ft. toft., From..... to.....ft. What is the nearest source of possible contamination: <table style="width:100%;"> <tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below)</td></tr> <tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td><u>surface runoff....</u></td></tr> <tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr> <tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr> <tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr> </table> Direction from well? <u>North</u> How many feet? <u>40 Ft.</u>					1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage	<u>surface runoff....</u>	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					
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year).... <u>6/1/95</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>6/1/95</u> under the business name of by (signature) <u>Clayton Carothers</u>																												
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly and print</u> 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.																													