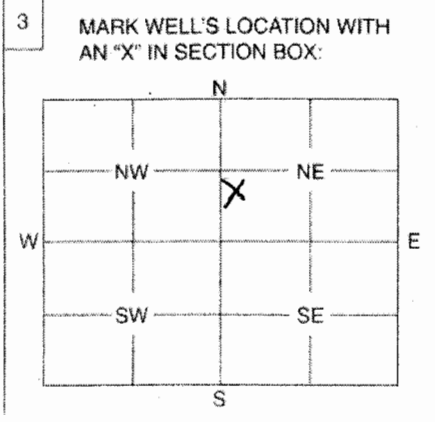


1	LOCATION OF WATER WELL: Marion	Fraction NW 1/4 SW 1/4 NE 1/4	Section Number 5	Township Number 20	Range Number 4
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Distance and direction from nearest town or city street address of well if located within city?
1014 E. Melvin, Marion, Kansas

2	WATER WELL OWNER: St. Luke Hospital	Board of Agriculture, Division of Water Resources Application Number:
	RR #, St. Address, Box #: 1014 E. Melvin	
	City, State, ZIP Code: Marion, Ks 66861	



4	DEPTH OF WELL 105 ft.												
	WELL'S STATIC WATER LEVEL 40.88 ... ft.												
	WELL WAS USED AS:												
	<table border="0"> <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 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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3 Feedlot	7 Domestic (Lawn & Garden)	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:										
	<table border="0"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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	Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much 3'										
	Casing height above or below land surface										

6	GROUT PLUG MATERIAL:																				
	<table border="0"> <tr> <td>1 Neat cement</td> <td>2 Cement grout</td> <td>3 Bentonite</td> <td>4 Other Surface silts and clays</td> </tr> </table>	1 Neat cement	2 Cement grout	3 Bentonite	4 Other Surface silts and clays																
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	Grout Plug Intervals: From 105 ft. to 3 ft., From 3 ft. to 0 ft., From to ft.																				
	What is the nearest source of possible contamination:																				
	<table border="0"> <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>cont. side</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>	1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage	cont. side	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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	Direction from well? How many feet?																				

FROM	TO	PLUGGING MATERIALS
105	3	Bentonite
3	0	Surface silts/clays

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 06/09/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/year) 06/21/05 under the business name of Associated Environmental, Inc. by (signature) Bradley J. Johnson
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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 top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.