

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																					
County: Linn	NE 1/4 NE 1/4 NW 1/4	31	21	25-East																					
Distance and direction from nearest town or city street address of well if located within city? 600 Magnolia Street, Pleasanton, Kansas																									
2 WATER WELL OWNER: Pete's of Erie, Inc.																									
RR#, St. Address, Box # P.O. Box 875																									
City, State, ZIP Code : Parsons, Kansas 67357																									
Board of Agriculture, Division of Water Resources Application Number:																									
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 10.0 ft.																							
<div style="text-align: center;">N <table border="1" style="margin: auto; border-collapse: collapse;"><tr><td></td><td style="text-align: center;">X</td><td></td></tr><tr><td>NW</td><td></td><td>NE</td></tr><tr><td></td><td></td><td></td></tr><tr><td>SW</td><td></td><td>SE</td></tr><tr><td></td><td></td><td></td></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td></td><td style="text-align: center;">S</td><td></td></tr></table></div>			X		NW		NE				SW		SE				W		E		S		WELL'S STATIC WATER LEVEL 3.75 ft.		
			X																						
		NW		NE																					
SW		SE																							
W		E																							
	S																								
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 2.375 in. Was casing pulled? Yes X No ___ If yes, how much? 10.0'																									
Casing height above or below land surface Unknown in. Well overdrilled to 10.0'																									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soils/Gravel																									
Grout Plug Intervals From 10.0 ft. to 1.0 ft. From 1.0 ft. to 0.0 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? North How many feet? 45																									
FROM	TO	CODE	PLUGGING MATERIALS																						
0.0	1.0		Compacted soils and gravel																						
1.0	10.0		Bentonite chips																						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 04/28/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 04/06/05 under the business name of Quad State 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.																									