

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
County:	Harvey	NW $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$	30		23S		1	(E/W)

Distance and direction from nearest town or city street address of well if located within city?

411 SW 14th Street, Newton, Kansas

2 WATER WELL OWNER: Stan Scudder

RR #, St. Address, Box #: P.O. Box 823

City, State, ZIP Code : Newton, KS 67114

Board of Agriculture, Division of Water Resources

Application Number:

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

		N	
		X	
	NW		NE
W			
			E
	SW		SE
		S	

4 DEPTH OF WELL ..... 16.5 ..... ft.

WELL'S STATIC WATER LEVEL ..... 10.56 ..... ft.

WELL WAS USED AS:

1 Domestic

2 Irrigation

3 Feedlot

4 Industrial

5 Public Water Supply

6 Oil Field Water Supply

7 Domestic (Lawn &amp; Garden)

8 Air Conditioning

8 Dewatering

(10) Monitoring Well

11 Injection Well

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 ABS

6 Asbestos-Cement

8 Concrete Tile

Blank casing diameter ..... 2 ..... in.

Was casing pulled? Yes ..... X

No .....

If yes, how much ..... ~ 3 feet cut off below grade

Casing height above or below land surface ..... in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite (4) Other Native soil/asphalt

Grout Plug Intervals: From ..... 16.5 ..... ft. to ..... 3 ..... ft., From ..... 3 ..... ft. to ..... 0.5 ..... ft., From ..... 0.5 ..... ft. to ..... 0 ..... ft.

What is the nearest source of possible contamination:

1 Septic tank

2 Sewer lines

3 Watertight sewer lines

4 Lateral lines

5 Cess pool

6 Seepage pit

7 Pit privy

8 Sewage lagoon

9 Feedyard

10 Livestock pens

11 Fuel storage

12 Fertilizer storage

13 Insecticide storage

14 Abandoned water well

15 Oil well/Gas well

(16) Other (specify below)  
Former USTs

Direction from well? .....

How many feet? .....

FROM	TO	PLUGGING MATERIALS
16.5	3	Bentonite
3	0.5	Native soil
0.5	0	Asphalt

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) ..... 9/29/2008 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... 708 ..... This Water Well Record was completed on (mo/day/year) ..... 10/2/2008 ..... under the business name of ..... Aquaterra Environmental Solutions, Inc. .... by (signature) ..... *[Signature]* .....

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.