

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																
County: <b>Anderson</b>		<b>SE 1/4 SW 1/4 SW 1/4</b>	<b>06</b>	<b>23</b>	<b>19-East</b>																																
Distance and direction from nearest town or city street address of well if located within city? <b>6<sup>TH</sup> &amp; Pine, Colony, KS</b>																																					
2 WATER WELL OWNER: <b>Charles Ward</b>		Board of Agriculture, Division of Water Resources																																			
RR#, St. Address, Box # <b>P.O. Box 26</b>		Application Number:																																			
City, State, ZIP Code : <b>Colony, Kansas 66015</b>																																					
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL <b>19.5</b> ft.																																			
<div style="text-align: center;">N <table border="1" style="margin: auto; border-collapse: collapse;"><tr><td colspan="2" rowspan="2">NW</td><td colspan="2" rowspan="2">NE</td></tr><tr><td colspan="2"></td></tr><tr><td colspan="2">SW <b>X</b></td><td colspan="2">SE</td></tr><tr><td colspan="2" rowspan="2">S</td><td colspan="2" rowspan="2">E</td></tr><tr><td colspan="2"></td></tr></table></div>		NW		NE				SW <b>X</b>		SE		S		E				WELL'S STATIC WATER LEVEL <b>14.58</b> ft.																			
						NW		NE																													
		SW <b>X</b>		SE																																	
S		E																																			
WELL WAS USED AS:																																					
<div style="display: flex; justify-content: space-between;"><div>1 Domestic 2 Irrigation 3 Feedlot 4 Industrial</div><div>5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning</div><div>9 Dewatering <b>10</b> Monitoring Well 11 Injection Well 12 Other</div></div>																																					
Was a chemical/bacteriological sample submitted to Department? Yes ___ No <b>X</b>																																					
If yes, mo/day/yr sample was submitted _____																																					
Water Well Disinfected: Yes ___ No <b>X</b>																																					
5 TYPE OF BLANK CASING USED:																																					
<div style="display: flex; justify-content: space-between;"><div>1 Steel <b>2</b> PVC</div><div>3 RMP (SR) 4 ABC</div><div>5 Wrought 6 Asbestos-Cement</div><div>7 Fiberglass 8 Concrete Tile</div><div>9 Other (specify below)</div></div>																																					
Blank casing diameter <b>2.375</b> in. Was casing pulled? Yes <b>X</b> No ___ If yes, how much? <b>3'</b>																																					
Casing height above or below land surface <b>Unknown</b> in.																																					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <b>3</b> Bentonite <b>4</b> Other <b>Soils/Gravel</b>																																					
Grout Plug Intervals From <b>19.5</b> ft. to <b>3.0</b> ft. From <b>3.0</b> ft. to <b>1.0</b> ft. From <b>1.0</b> ft. to <b>0.0</b> ft.																																					
What is the nearest source of possible contamination:																																					
<div style="display: flex; justify-content: space-between;"><div>1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool</div><div>6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens</div><div><b>11</b> Fuel storage (former) 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well</div><div>16 Other (specify below)</div></div>																																					
Direction from well? <b>N/A</b> How many feet? <b>0</b>																																					
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>CODE</th><th>PLUGGING MATERIALS</th></tr></thead><tbody><tr><td><b>0.0</b></td><td><b>1.0</b></td><td></td><td><b>Gravel</b></td></tr><tr><td><b>1.0</b></td><td><b>3.0</b></td><td></td><td><b>Soils</b></td></tr><tr><td><b>3.0</b></td><td><b>19.5</b></td><td></td><td><b>Bentonite chips</b></td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	CODE	PLUGGING MATERIALS	<b>0.0</b>	<b>1.0</b>		<b>Gravel</b>	<b>1.0</b>	<b>3.0</b>		<b>Soils</b>	<b>3.0</b>	<b>19.5</b>		<b>Bentonite chips</b>																
FROM	TO	CODE	PLUGGING MATERIALS																																		
<b>0.0</b>	<b>1.0</b>		<b>Gravel</b>																																		
<b>1.0</b>	<b>3.0</b>		<b>Soils</b>																																		
<b>3.0</b>	<b>19.5</b>		<b>Bentonite chips</b>																																		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>05/26/08</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>692</b> This Water Well Record was completed on (mo/day/yr) <b>06/10/08</b> under the business name of <b>Quad State Services, Inc.</b> 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.																																					