

1 LOCATION OF WATER WELL: County: <b>HARVEY</b>	Fraction <b>SW 1/4 SW 1/4 SW 1/4</b>	Section Number <b>33</b>	Township Number <b>24</b>	Range Number <b>1E</b>
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Distance and direction from nearest town or city street address of well if located within city?  
**125<sup>th</sup> STREET NORTH & BROADWAY, SEDGWICK, KANSAS**

2 WATER WELL OWNER: <b>DON FRANZ</b> RR #, St. Address, Box #: <b>125<sup>th</sup> STREET NORTH</b> City, State, ZIP Code : <b>SEDGWICK, KANSAS 67570</b>	Board of Agriculture, Division of Water Resources Application Number:
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  <div style="text-align: center;"> </div>	4 DEPTH OF WELL ..... <b>25'</b> ..... ft WELL'S STATIC WATER LEVEL ..... <b>NA</b> ..... ft. 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 Domestic (Lawn &amp; Garden) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other <b>OBSERVATION</b> </div> </div> <p>Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> <b>✓</b>  If yes, mo/day/yr sample was submitted .....</p> <p>Water Well Disinfected: Yes ..... No <input checked="" type="checkbox"/> <b>✓</b></p>
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5 TYPE OF BLANK CASING USED: 1 Steel    3 RMP (SR)    5 Wrought    7 Fiberglass    9 Other (Specify below) <b>2 PVC</b> 4 ABS    6 Asbestos-Cement    8 Concrete Tile	Blank casing diameter ..... <b>2</b> ..... in.    Was casing pulled? Yes <input checked="" type="checkbox"/> <b>✓</b> No ..... Casing height above or below land surface ..... <b>0</b> ..... in.    If yes, how much <b>1'</b>
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6 GROUT PLUG MATERIAL: <b>1 Neat cement</b> 2 Cement grout    3 Bentonite <b>4 Other SAND</b>	Grout Plug Intervals: From <b>0</b> ft. to <b>22</b> ft., From <b>22</b> ft. to <b>25</b> ft., From ..... to ..... ft.
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What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below) <b>FORMER UST</b>
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? **E**    How many feet? **20'**

FROM	TO	PLUGGING MATERIALS
0	22	CEMENT 8"
22	25	SAND 8"

**OB-1**

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>3/31/03</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>527</b>	This Water Well Record was completed on (mo/day/year) <b>4/25/03</b> under the business name of <b>GEOCORE INC.</b>
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by (signature) *Don Franz*

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.