

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: Butler	SW/ 1/4 SE1/4 SE1/4	26	25	6 E																								
Distance and direction from nearest town or city street address of well if located within city? 5 miles East of El Dorado, KS																													
2	WATER WELL OWNER:	Dr. Guy Recsh																											
RR#, St. Address, Box #: R.R. City, State, ZIP Code : El Dorado, KS 67042			Board of Agriculture, Division of Water Resources Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL.....120.....ft. WELL'S STATIC WATER LEVEL.....ft. WELL WAS USED AS: <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td>N</td><td></td><td></td><td>E</td></tr> <tr><td>W</td><td></td><td></td><td></td></tr> <tr><td>S</td><td></td><td></td><td>E</td></tr> <tr><td colspan="2"></td><td colspan="2" style="text-align: center;">X</td></tr> <tr><td colspan="4" style="text-align: center;">S</td></tr> </table> <div style="display: inline-block; vertical-align: middle; margin-left: 20px;">         1 Domestic      5 Public Water Supply      9 Dewatering          2 Irrigation     6 Oil Field Water Supply     10 Monitoring Well          3 Feedlot       7 Lawn and Garden Only      11 Injection Well          4 Industrial     8 Air Conditioning       12 Other..Heat Pump.....  <p style="text-align: center;">6 @ 120 ft.</p> <p>Was a chemical/bacteriological sample submitted to Department? Yes....No. <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted.....</p> <p>Water Well Disinfected: Yes..... No. <input checked="" type="checkbox"/>...</p> </div>								N			E	W				S			E			X		S			
N			E																										
W																													
S			E																										
		X																											
S																													
5	TYPE OF BLANK CASING USED:	1 Steel    3 RMP (SR)    5 Wrought    7 Fiberglass <input checked="" type="checkbox"/> Other (specify below) 2 PVC      4 ABS        6 Asbestos-Cement    8 Concrete Tile    .....Polyethylene..... <p>Blank casing diameter.. <u>3/4</u>....in.    Was casing pulled? Yes..... No..... If yes, how much.....          Casing height above or below land surface.....in.</p>																											
6	GROUT PLUG MATERIAL:	1 Neat cement    2 Cement grout <input checked="" type="checkbox"/> Bentonite    4 Other..... <p>Grout Plug Intervals:    From...0..ft. to <u>120</u>..ft.,    From.....ft. to .....ft.,    From..... to.....ft.</p> <p>What is the nearest source of possible contamination:</p> <table border="0" style="width: 100%;"> <tr><td style="width: 25%;">1 Septic tank</td><td style="width: 25%;">6 Seepage pit</td><td style="width: 25%;">11 Fuel storage</td><td style="width: 25%;">16 Other (specify below)</td></tr> <tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td>.....</td></tr> <tr><td><u>XXWatertight sewer lines</u></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> <p>Direction from well? ....<u>East</u>.....    How many feet? .....<u>100</u>..ft.....</p>				1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage	.....	<u>XXWatertight sewer lines</u>	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	.....				
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)																										
2 Sewer lines	7 Pit privy	12 Fertilizer storage	.....																										
<u>XXWatertight sewer lines</u>	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	.....																										
	FROM	TO	PLUGGING MATERIALS																										
	0	11	Limestone																										
	11	23	Flintrock																										
	23	31	Limestone																										
	31	48	Gray Shale																										
	48	61	Limestone																										
	61	83	Flintrock																										
	83	104	Gray Shale with Limestone																										
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>11-28-95</u> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>138</u> ..... This Water Well Record was completed on (mo/day/year) <u>12-28-95</u> ..... under the business name of <u>Peterson Irrigation, Inc.</u> ..... by (signature) <u>Mike Gettum</u> .....																												

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.