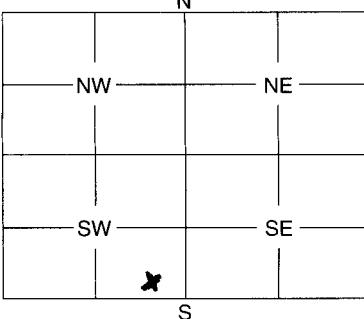


1	LOCATION OF WATER WELL: County: Butler	Fraction SE_{1/4} SE_{1/4} SW_{1/4}	Section Number 24	Township Number 25	Range Number 06	SW																											
Distance and direction from nearest town or city street address of well if located within city? From Highway 54/177, 3 miles north, 1 1/2 miles east																																	
2	WATER WELL OWNER: RR #, St. Address, Box #: 6420 NE 20th St City, State, ZIP Code : El Dorado KS 67042	Ken Sterbenz																															
Board of Agriculture, Division of Water Resources Application Number:																																	
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4	DEPTH OF WELL 24 ft.																														
WELL'S STATIC WATER LEVEL 16 ft.																																	
WELL WAS USED AS:																																	
<table border="0"> <tr> <td><input type="checkbox"/> Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input checked="" type="checkbox"/> Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td><input type="checkbox"/> Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td><input type="checkbox"/> Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>							<input type="checkbox"/> Domestic	5 Public Water Supply	9 Dewatering	<input checked="" type="checkbox"/> Irrigation	6 Oil Field Water Supply	10 Monitoring Well	<input type="checkbox"/> Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	<input type="checkbox"/> Industrial	8 Air Conditioning	12 Other															
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Was a chemical / bacteriological sample submitted to Department? Yes No ✓ If yes, mo/day/yr sample was submitted																																	
Water Well Disinfected: Yes X No																																	
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						Rock-lined																											
Blank casing diameter in.			Was casing pulled? Yes No If yes, how much																														
Casing height above or below land surface in.			Rock lining removed to 5' below soil surface																														
6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other																												
Grout Plug Intervals: From 5 ft. to 3 ft.			From ft. to ft., From to 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)																													
Direction from well? NE			How many feet? +1,000																														
<table border="1"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>3</td> <td>0</td> <td>Topsoil</td> </tr> <tr> <td>5</td> <td>3</td> <td>Bentonite</td> </tr> <tr> <td>16</td> <td>5</td> <td>Subsoil fill</td> </tr> <tr> <td>24</td> <td>16</td> <td>Sand/bleach</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>							FROM	TO	PLUGGING MATERIALS	3	0	Topsoil	5	3	Bentonite	16	5	Subsoil fill	24	16	Sand/bleach												
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Note: This site was used as a well plugging demonstration on June 10, 2004, Butler Co. Cons. Dist. was the sponsor.

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6/10/04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's license No. 628 This Water Well Record was completed on (mo/day/year) 6/10/04 under the business name of J. P. Enterprises by (signature) J. P. Jones
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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.