

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: <u>Sedgwick</u>	<u>SE 1/4 NE 1/4 NW 1/4</u>	<u>33</u>	<u>265</u>	<u>18</u>																								
Distance and direction from nearest town or city street address of well if located within city? <u>801 E. 37th St. N. in Wichita, KS</u>																													
2	WATER WELL OWNER: <u>New Coleman Holdings</u> <u>VEW-215</u>																												
	RR #, St. Address, Box #: <u>35 E. 62nd St.</u>		Board of Agriculture, Division of Water Resources																										
	City, State, ZIP Code: <u>New York, NY 10021</u>		Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <table border="1" style="margin: auto; text-align: center;"> <tr><td colspan="3">N</td></tr> <tr><td>W</td><td>X</td><td>E</td></tr> <tr><td>S</td><td></td><td></td></tr> </table>					N			W	X	E	S																	
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4	DEPTH OF WELL <u>19.6</u> ft. WELL'S STATIC WATER LEVEL <u>N/A</u> ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 <u>Other Vapor Extraction</u></td> </tr> </table> Was a chemical / bacteriological sample submitted to Department? Yes No <u>X</u> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <u>X</u>					1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 <u>Other Vapor Extraction</u>												
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5	TYPE OF BLANK CASING USED: <table style="width:100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td><u>2 PVC</u></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> Blank casing diameter <u>2</u> in. Was casing pulled? Yes No <u>X</u> If yes, how much Casing height above or below land surface <u>-6</u> in.					1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	<u>2 PVC</u>	4 ABS	6 Asbestos-Cement	8 Concrete Tile															
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6	GROUT PLUG MATERIAL: <u>1 Neat cement</u> 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From <u>.5</u> ft. to <u>19.6</u> ft., From ft. to ft., From to ft. What is the nearest source of possible contamination: <table style="width:100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td><u>2 Sewer lines</u></td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</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> Direction from well? <u>South</u> How many feet? <u>15</u>					1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	<u>2 Sewer lines</u>	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					
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>6/21/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>676</u> This Water Well Record was completed on (mo/day/year) <u>7/12/06</u> under the business name of <u>Whitetail Drilling, LLC</u> by (signature) <u>[Signature]</u>																												
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.																													