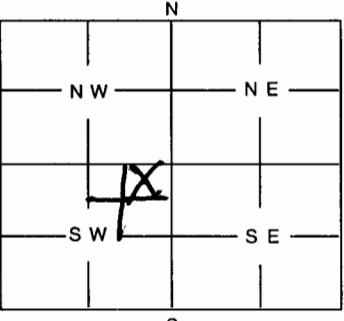


1 LOCATION OF WATER WELL: County: <u>Redwood</u>	Fraction <u>NENE 1/4 SW 1/4</u>	Section Number <u>32</u>	Township Number <u>26</u>	Range Number <u>1 E</u>
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Distance and direction from nearest town or city street address of well if located within city?

3237 n Shelton

2 WATER WELL OWNER: <u>m? Pigeon</u> RR #, St. Address, Box #: <u>3237 n Shelton</u> City, State, ZIP Code : <u>Wichita Ks 67204</u>	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 <u>35</u> ft. WELL'S STATIC WATER LEVEL <u>19</u> 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 _____ </div> </div> 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>
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5 TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 PVC 3 RMP (SR) 4 ABS </div> <div> 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile </div> <div> 9 Other (Specify below) _____ </div> </div> Blank casing diameter <u>6</u> in. Was casing pulled? Yes _____ No <u>X</u> If yes, how much _____ Casing height above or below land surface <u>48</u> in.	
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6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Plug Intervals: From <u>20</u> ft. to <u>4</u> ft., From _____ ft. to _____ ft., From _____ to _____ 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> 11 Fuel storage 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? <u>South</u> How many feet? <u>50</u>	
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FROM	TO	PLUGGING MATERIALS
<u>35</u>	<u>20</u>	<u>Sand &amp; gravel</u>
<u>20</u>	<u>4'</u>	<u>Cement grout</u>
<u>4</u>	<u>0</u>	<u>Top soil to fill Pit</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>3-9-07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>472</u> <u>3-9-07</u> under the business name of <u>Beardon Pump &amp; Well</u> by (signature) <u>David Beardon</u>	This Water Well Record was completed on (mo/day/year) _____
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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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.