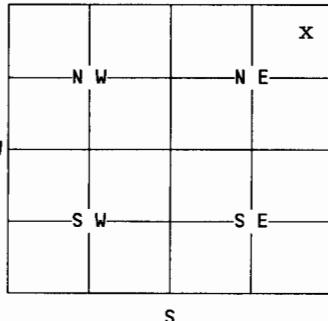


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: BUTLER		NE 1/4 NE1/4NE 1/4	23	26	3E	
Distance and direction from nearest town or city street address of well if located within city? 1/2 Mile South, 2 1/4 Miles East of Benton, Kansas						
2	WATER WELL OWNER: Paul Stephens					
RR#, St. Address, Box #: 14233 SW 40th St			Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Benton KS 67017			Application Number:			
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N		4 DEPTH OF WELL.....85.....ft.			
			WELL'S STATIC WATER LEVEL 34.....ft.			
			WELL WAS USED AS:			
			<input checked="" type="checkbox"/> 1 Domestic 5 Public Water Supply 9 Dewatering <input type="checkbox"/> 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well <input type="checkbox"/> 3 Feedlot 7 Lawn and Garden Only 11 Injection Well <input type="checkbox"/> 4 Industrial 8 Air Conditioning 12 Other.....			
	Was a chemical/bacteriological sample submitted to Department? Yes....No.... <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted.....					
	Water Well Disinfected: Yes.. <input checked="" type="checkbox"/> ... No.....					
5	TYPE OF BLANK CASING USED:					
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass <input checked="" type="checkbox"/> 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Hand.Dug...Rock.Wall.Lining.....					
	Blank casing diameter....72.....in. Was casing pulled? Yes..... No..... If yes, how much.....					
	Casing height above or below land surface.....in. Rock lining removed to 7' below ground.					
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....					
	Grout Plug Intervals: From.....ft. to.....ft., From.....ft. toft., From..... to.....ft.					
	What is the nearest source of possible contamination:					
	<input checked="" type="checkbox"/> 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) <input type="checkbox"/> 2 Sewer lines 7 Pit privy 12 Fertilizer storage <input type="checkbox"/> 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage <input checked="" type="checkbox"/> 4 Lateral lines 9 Feedyard 14 Abandoned water well <input type="checkbox"/> 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well					
	Direction from well?North-Northeast How many feet?75' - 100'					
	FROM	TO	PLUGGING MATERIALS			
	85'	51'	Sand			
	51'	5'	Subsoil, Rock Lining			
	5'	4.5'	Bentonite			
	4.5'	0	Topsoil			
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year).....5/30/98..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year)6/4/98..... under the business name of ..Butler.County.Conservation.District... by (signature) .. <i>Sandra Keen</i>					
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.						