

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Butler	SE ¼ SE ¼ NW ¼	3	26	5-East

Distance and direction from nearest town or city street address of well if located within city?

1701 W. Central Street, El Dorado, Kansas2 WATER WELL OWNER: **Town & Country Markets**RR#, St. Address, Box # **P.O. Box 17087**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code : **Wichita, Kansas 67217**

Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

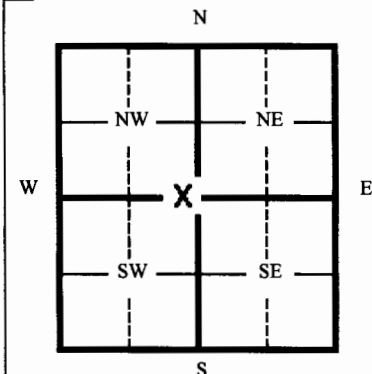
4 DEPTH OF WELL **5.5** ft.WELL'S STATIC WATER LEVEL **Dry** ft.

WELL WAS USED AS:

- | | | |
|--------------|------------------------------|--------------------|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well |
| 3 Feedlot | 7 Lawn and Garden (domestic) | 11 Injection Well |
| 4 Industrial | 8 Air Conditioning | 12 Other |

Was a chemical/bacteriological sample submitted to Department? Yes ___ No **X**

If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes ___ No **X**

5 TYPE OF BLANK CASING USED:

- | | | | | |
|---------|------------|-----------|--------------|-------------------------|
| 1 Steel | 3 RMP (SR) | 5 Wrought | 7 Fiberglass | 9 Other (specify below) |
|---------|------------|-----------|--------------|-------------------------|

- | | | | |
|-------|-------|-------------------|-----------------|
| 2 PVC | 4 ABC | 6 Asbestos-Cement | 8 Concrete Tile |
|-------|-------|-------------------|-----------------|

Blank casing diameter **2.375** in. Was casing pulled? Yes **X** No ___ If yes, how much? **5.5'**Casing height above or below land surface **Unknown** in. **Overdrilled well to 5.5'**6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other **Soils/Concrete**Grout Plug Intervals From **5.5** ft. to **3.0** ft. From **3.0** ft. to **1.0** ft. From **1.0** ft. to **0.0** ft.

What is the nearest source of possible contamination:

- | | | | |
|--------------------------|-------------------|--------------------------|--------------------------|
| 1 Septic tank | 6 Seepage pit | 11 Fuel storage (former) | 16 Other (specify below) |
| 2 Sewer lines | 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 | |

Direction from well? **West-northwest**How many feet? **150**

FROM	TO	CODE	PLUGGING MATERIALS
0.0	1.0		Concrete
1.0	3.0		Compacted soils
3.0	15.0		Bentonite chips

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **10/17/06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **692** This Water Well Record was completed on (mo/day/yr) **10/30/06** under the business name of **Quad State Services, Inc.** by (signature) *[Signature]*

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.