| 1 LOCATION OF WA | TER WELL: | Fraction | Section Number | Township Number | Range Number |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------|----------------|
| County: SENG | WICK | SE 1/4 NW 1/4 NW 1/4 | 21 | 275 | IE |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | |
| 3A. South 440 N. Topeka, Wichita KS 67202 | | | | | |
| 2 WATER WELL OWNER: Robert E. Blubaugh 1233 Dunsworth | | | | | |
| RR#, St. Address, Box #: City, State, ZIP Code: Wichita Ks 6721Z Board of Agriculture, Division of Water Resources Application Number: | | | | | |
| MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL . 1.7ft. | | | | | |
| N WELL'S STATIC WATER LEVELft. | | | | | |
| | | WELL WAS USED AS: | | | |
| w | N E | 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial | 5 Public Water Sup 6 Oil Field Water: 7 Lawn and Garden (8 Air Conditioning | Supply 10 Monitorin Only 11 Injection | g Well Well |
| S W———————————————————————————————————— | | | | | |
| Water Well Disinfected: Yes 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 | | | | | |
| Blank casing diameter. 1:14in. Was casing pulled? Yes.X No If yes, how much36.in Casing height above or below land surface36.inin. | | | | | |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | |
| Grout Plug Intervals: From. 15.ft. to3ft., Fromft. toft., From toft. | | | | | |
| What is the nearest source of possible contamination: | | | | | |
| 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) | | | | | |
| 2 Sewer lines | S | 7 Pit privy | 12 Fertilizer stored | | t i |
| 3 Watertight 4 Lateral li | | 8 Sewage lagoon 9 Feedyard | 13 Insecticide store 14 Abandoned water w | age Tree | tment |
| 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well | | | | | |
| Direction from well? | | | | | |
| FROM TO PLUGGING MATERIALS | | | | | |
| 0 3 | Top | 5011 | | | |
| 6 3 | 100ME | NT GROWT | | | |
| 15 6 | Cervie | WI GROWI | | | |
| 32 15 | Sand | Bleach | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:This water well was plugged under my jurisdiction and was completed | | | | | |
| on (mo/day/year) | | | | | |
| by (signature) Report E. Blubaugh 10 -10 -15 | | | | | |
| | | | | | |
| 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: 913/296-3565. Send one to Water Well Owner and retain one for your records. | | | | | |