

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: <u>Sedgwick</u>	<u>SW 1/4 NE 1/4 NE 1/4</u>	<u>4</u>	<u>27S</u>	<u>1</u> E/W																								
Distance and direction from nearest town or city street address of well if located within city? <u>Just S. of 2824 N. Ohio Wichita, KS 67201</u>																													
2	WATER WELL OWNER: <u>Universal Lubricants LLC</u>																												
RR #, St. Address, Box #: <u>2824 N. Ohio Box 2920</u>			Board of Agriculture, Division of Water Resources																										
City, State, ZIP Code: <u>Wichita, KS 67201</u>			Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4	DEPTH OF WELL <u>16</u> ft.																									
<div style="text-align: center;">N</div> <table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center;">NW</td><td style="width: 50%; text-align: center;">NE</td></tr><tr><td style="width: 50%; text-align: center;">SW</td><td style="width: 50%; text-align: center;">SE</td></tr></table> <div style="text-align: center;">S</div>		NW	NE	SW	SE	WELL'S STATIC WATER LEVEL <u>14</u> ft.																							
		NW	NE																										
		SW	SE																										
		WELL WAS USED AS:																											
<div style="display: flex; justify-content: space-between;"><div><div>1 Domestic</div><div>2 Irrigation</div><div>3 Feedlot</div><div>4 Industrial</div></div><div><div>5 Public Water Supply</div><div>6 Oil Field Water Supply</div><div>7 Domestic (Lawn & Garden)</div><div>8 Air Conditioning</div></div><div><div>9 Dewatering</div><div><input checked="" type="radio"/> 10 Monitoring Well</div><div>11 Injection Well</div><div>12 Other</div></div></div>																													
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:																												
<div style="display: flex; justify-content: space-between;"><div>1 Steel</div><div>3 RMP (SR)</div><div>5 Wrought</div><div>7 Fiberglass</div><div>9 Other (Specify below)</div></div> <div style="display: flex; justify-content: space-between;"><div><input checked="" type="radio"/> 2 PVC</div><div>4 ABS</div><div>6 Asbestos-Cement</div><div>8 Concrete Tile</div><div>.....</div></div>																													
Blank casing diameter <u>4</u> in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much <u>attempted</u>																													
Casing height above or below land surface <u>36</u> in. <u>cut-off</u>																													
6	GROUT PLUG MATERIAL: <input checked="" type="radio"/> 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>Fill Dirt</u>																												
Grout Plug Intervals: From <u>16</u> ft. to <u>3</u> ft., From <u>3</u> ft. to <u>0</u> ft., From to ft.																													
What is the nearest source of possible contamination:																													
<div style="display: flex; justify-content: space-between;"><div><div>1 Septic tank</div><div>2 Sewer lines</div><div>3 Watertight sewer lines</div><div>4 Lateral lines</div><div>5 Cess pool</div></div><div><div>6 Seepage pit</div><div>7 Pit privy</div><div>8 Sewage lagoon</div><div>9 Feedyard</div><div>10 Livestock pens</div></div><div><div>11 Fuel storage</div><div>12 Fertilizer storage</div><div>13 Insecticide storage</div><div>14 Abandoned water well</div><div>15 Oil well/Gas well</div></div><div><div><input checked="" type="radio"/> 16 Other (specify below)</div><div><u>none known</u></div></div></div>																													
Direction from well? How many feet?																													
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 15%;">FROM</th><th style="width: 15%;">TO</th><th style="width: 70%;">PLUGGING MATERIALS</th></tr></thead><tbody><tr><td style="text-align: center;"><u>16</u></td><td style="text-align: center;"><u>3</u></td><td><u>Neat Cement</u></td></tr><tr><td style="text-align: center;"><u>3</u></td><td style="text-align: center;"><u>0</u></td><td><u>Fill Dirt</u></td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	PLUGGING MATERIALS	<u>16</u>	<u>3</u>	<u>Neat Cement</u>	<u>3</u>	<u>0</u>	<u>Fill Dirt</u>															
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7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>7/12/08</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u> This Water Well Record was completed on (mo/day/year) under the business name of <u>Hayne Christensen Co.</u> by (signature) <u>Russell W. Reddy</u>																												
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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.																													