

Emw-3

| 1 LOCATION OF WATER WELL:<br>County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Fraction <u>SW 1/4 SW 1/4 SE 1/4</u> | Section Number <u>1</u>    | Township Number <u>29S</u> | Range Number <u>1 EAST</u> |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
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| Distance and direction from nearest town or city street address of well if located within city?<br><u>620 N. Baltimore, Derby KS</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                            |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 2 WATER WELL OWNER: <u>Derby Apco</u><br>RR#, St. Address, Box #: <u>c/o AET</u><br>City, State, ZIP Code: <u>404 Pottawatomie Manhattan KS 66502</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                      |                            |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      |                            |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br>N<br><table border="1" style="width:100%; text-align: center; border-collapse: collapse;"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td>N W</td><td></td><td>N E</td></tr> <tr><td>W</td><td></td><td></td><td></td><td>E</td></tr> <tr><td></td><td>S W</td><td></td><td>S E</td></tr> <tr><td></td><td></td><td>X</td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table><br>S                                                                                                                                                                                                                                                                                                                                                                                                               |                                      |                            |                            |                            |               |               | N W                |                          | N E                     | W                       |                       |                   |                          | E               |                        | S W                        |                 | S E        |                         |  | X           |                   |                      |  |  |  |  |  |  |  |  |  |  |  | 4 DEPTH OF WELL..... <u>59.5</u> .....ft.<br>WELL'S STATIC WATER LEVEL..... <u>46</u> .....ft.<br><br>WELL WAS USED AS:<br><table style="width:100%;"> <tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr> <tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr> <tr><td>3 Feedlot</td><td>7 Lawn and Garden Only</td><td>11 Injection Well</td></tr> <tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other.....</td></tr> </table><br>Was a chemical/bacteriological sample submitted to Department? Yes.... <u>No</u> ...<br>If yes, mo/day/yr sample was submitted.....<br><br>Water Well Disinfected: Yes..... No... <u>X</u> .. |  |  | 1 Domestic | 5 Public Water Supply | 9 Dewatering | 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well | 3 Feedlot | 7 Lawn and Garden Only | 11 Injection Well | 4 Industrial | 8 Air Conditioning | 12 Other..... |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                            |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | N W                                  |                            | N E                        |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| W                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                      |                            |                            | E                          |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | S W                                  |                            | S E                        |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
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| 1 Domestic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 5 Public Water Supply                | 9 Dewatering               |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 2 Irrigation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 6 Oil Field Water Supply             | 10 Monitoring Well         |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 3 Feedlot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 7 Lawn and Garden Only               | 11 Injection Well          |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 4 Industrial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 8 Air Conditioning                   | 12 Other.....              |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 5 TYPE OF BLANK CASING USED:<br><table style="width:100%;"> <tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (specify below)</td></tr> <tr><td>2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr> </table><br>Blank casing diameter... <u>2</u> .....in. Was casing pulled? Yes... <u>X</u> No..... If yes, how much... <u>20'</u> .....<br>Casing height above or below land surface... <u>0</u> .....in.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                      |                            |                            |                            | 1 Steel       | 3 RMP (SR)    | 5 Wrought          | 7 Fiberglass             | 9 Other (specify below) | 2 PVC                   | 4 ABS                 | 6 Asbestos-Cement | 8 Concrete Tile          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3 RMP (SR)                           | 5 Wrought                  | 7 Fiberglass               | 9 Other (specify below)    |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 2 PVC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4 ABS                                | 6 Asbestos-Cement          | 8 Concrete Tile            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 6 GROUT PLUG MATERIAL: 1 Neat cement <u>Chlor. sand</u> 3 Bentonite <u>Other. Silts + clays</u><br>Grout Plug Intervals: From... <u>2 59.5</u> ...ft. to... <u>46</u> ...ft., From... <u>3 46</u> ...ft. to... <u>3</u> ...ft., From... <u>4 3</u> ...ft. to... <u>GS</u> ...ft.<br><br>What is the nearest source of possible contamination:<br><table style="width:100%;"> <tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below)</td></tr> <tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td><u>cont. site</u></td></tr> <tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td><u>UST</u></td></tr> <tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr> <tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr> </table><br>Direction from well? ..... How many feet? ..... |                                      |                            |                            |                            | 1 Septic tank | 6 Seepage pit | 11 Fuel storage    | 16 Other (specify below) | 2 Sewer lines           | 7 Pit privy             | 12 Fertilizer storage | <u>cont. site</u> | 3 Watertight sewer lines | 8 Sewage lagoon | 13 Insecticide storage | <u>UST</u>                 | 4 Lateral lines | 9 Feedyard | 14 Abandoned water well |  | 5 Cess Pool | 10 Livestock pens | 15 Oil well/Gas well |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 6 Seepage pit                        | 11 Fuel storage            | 16 Other (specify below)   |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 7 Pit privy                          | 12 Fertilizer storage      | <u>cont. site</u>          |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 3 Watertight sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 8 Sewage lagoon                      | 13 Insecticide storage     | <u>UST</u>                 |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 4 Lateral lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 9 Feedyard                           | 14 Abandoned water well    |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| 5 Cess Pool                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 10 Livestock pens                    | 15 Oil well/Gas well       |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>59.5</u></td> <td><u>46</u></td> <td><u>chlorinated sand</u></td> </tr> <tr> <td><u>46</u></td> <td><u>3</u></td> <td><u>bentonite</u></td> </tr> <tr> <td><u>3</u></td> <td><u>GS</u></td> <td><u>surface silts/clays</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>59.5</u>              | <u>46</u>               | <u>chlorinated sand</u> | <u>46</u>             | <u>3</u>          | <u>bentonite</u>         | <u>3</u>        | <u>GS</u>              | <u>surface silts/clays</u> |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | TO                                   | PLUGGING MATERIALS         |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| <u>59.5</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <u>46</u>                            | <u>chlorinated sand</u>    |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| <u>46</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <u>3</u>                             | <u>bentonite</u>           |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
| <u>3</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <u>GS</u>                            | <u>surface silts/clays</u> |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |
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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)..... <u>11/83</u> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... <u>585</u> ..... This Water Well Record was completed on (mo/day/year)..... <u>11/83</u> ..... under the business name of <u>Associated Environmental, Inc.</u> by (signature) <u>D. Dunham</u> for <u>D. Dunham</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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                            |                            |                            |               |               |                    |                          |                         |                         |                       |                   |                          |                 |                        |                            |                 |            |                         |  |             |                   |                      |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |            |                       |              |              |                          |                    |           |                        |                   |              |                    |               |