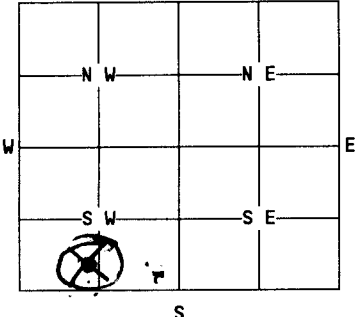


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: Sedgwick <i>087</i>	SE 1/4 ^W 1/4 SW 1/4	17	29	2 <i>E</i>																								
Distance and direction from nearest town or city street address of well if located within city? 2 miles North & 1/2 mile East of Mulvane, KS																													
2	WATER WELL OWNER: Mike Wenger & Associates																												
RR#, St. Address, Box #: R.R.			Board of Agriculture, Division of Water Resources																										
City, State, ZIP Code : Mulvane, KS 67110			Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N		4 DEPTH OF WELL.....200.....ft. WELL'S STATIC WATER LEVEL.....ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden Only 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other.....																										
																													
Was a chemical/bacteriological sample submitted to Department? Yes....No <i>X</i> .. If yes, mo/day/yr sample was submitted..... Water Well Disinfected: Yes. <i>X</i> 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 3/4" Polyethylene....																													
Blank casing diameter..3/4"....in. Was casing pulled? Yes..... No. <i>X</i> ... If yes, how much..... Casing height above or below land surface.....in.																													
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other.....																												
Grout Plug Intervals: From <u>0</u> ...ft. to <u>200</u> ...ft., From.....ft. toft., From..... toft.																													
What is the nearest source of possible contamination:																													
1 Septic tank 2 Sewer lines 3 Watertight sewer lines <u>4 Lateral lines</u> 5 Cess Pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)																													
Direction from well? ...North.....			How many feet? ...150 ft.....																										
<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>0</td><td>5</td><td>Top Soil</td></tr> <tr><td>5</td><td>29</td><td>Red Clay</td></tr> <tr><td>29</td><td>32</td><td>Fine Sand</td></tr> <tr><td>32</td><td>38</td><td>Medium Sand</td></tr> <tr><td>38</td><td>90</td><td>Gray Shale</td></tr> <tr><td>90</td><td>150</td><td>Gray Shale & Gypsum</td></tr> <tr><td>150</td><td>200</td><td>Hard Gray Shale & Limestone</td></tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	0	5	Top Soil	5	29	Red Clay	29	32	Fine Sand	32	38	Medium Sand	38	90	Gray Shale	90	150	Gray Shale & Gypsum	150	200	Hard Gray Shale & Limestone
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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).....4/95..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.138..... This Water Well Record was completed on (mo/day/year)..... under the business name of ...Peterson Irrigation Inc..... by (signature)Mike Peterson.....																													
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.																													

913-822-3520