1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Wilson	SE 1/4 NW 1/4 NW 1/4	20	30S	16E
Distance and direction from nearest town or city street address of well if located within city?				
See map				
2 WATER WELL OWNER: BP An				
RR#, St. Address, Box # 1100 N			of Agriculture, Division	
City, State, ZIP Code : Neode	sha, Kansas 66757	Applica	ation Number: Not A	pplicable
3 MARK WELL'S LOCATON WITH A "X" IN SECTION BOX:	4 DEPTH OF WELL 2	2 7 ft.		
N				
<u> </u>	WELL'S STATIC WATER LEVEL	Unk. ft.		
	WELL WAS USED AS:			
X w NE	WELL WING GOLD NO.			
i i	1 Domestic 5 Publ	ic Water Supply	9 Dewaterir	ng .
W	2 Irrigation 6 Oil F	ield Water Supply	10 Monitoring	g Well
	3 Feedlot 7 Lawr	n and Garden (domestic	•	
	4 Industrial 8 Air C	Conditioning	12 Other	
SW SE	Was a chemical/bacteriological sample su	ubmitted to Department	? Yes M	۸۰ X
	If yes, mo/day/yr sample was submitted			
	Water Well Disinfected: Yes	No X		
3				
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				
2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much 27 ft.				
Casing height above or below land surfacein.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
Grout Plug Intervals From 0 ft. to 27 ft. From ft. to ft. From ft. to ft.				
What is the nearest source of possible contamination:				
l .	6 Seepage pit 11 Fuels		16 Other (specify be	elow)
l .	· · · · · ·	zer storage		
1		icide storage		
		doned water well		
5 Cess Pool 10 Livestock pens 15 Oil well/ Gas well				
Direction from well? Northwest How many feet? 1,500				
FROM TO CODE	PLUGGING MATERIALS			
0 27 - bent	tonite			
		-		
7 CONTRACTOR'S OR LANDOV				
- Solver to to the transfer to				
on (mo/day/yr) 11/30/05 and this record is true to the best of my knowledge and belief. Kansas				
Water Well Contractor's Lice	nse No. 616		Record was completed	on (mo/day/yr)
3/7/06	under the business pame of	Th	iele Geotech, Inc.	
by (signature)	1)=//			
	in blanks and circle the correct answe	rs. Send three coni	es to Kansas Denarto	nent of Health and
Environment, Bureau of Wate	er, 1000 S W Jackson St., Ste. 420, T			



