

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																				
County: Labette		SE ¼ SE ¼ NW ¼	18	31	20 E																																				
Distance and direction from nearest town or city street address of well if located within city? 806 N 16th Street, Parsons																																									
2 WATER WELL OWNER: Parcom Telephone CO;																																									
RR#, St. Address, Box # 806 N 16th St.																																									
City, State, ZIP Code : Parsons, KS																																									
Board of Agriculture, Division of Water Resources Application Number:																																									
3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 16.50 ft.																																							
<div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px; text-align: center;">NW</td> <td style="width: 50px; height: 50px; text-align: center;">NE</td> </tr> <tr> <td style="width: 50px; height: 50px; text-align: center;">X</td> <td style="width: 50px; height: 50px;"></td> </tr> <tr> <td style="width: 50px; height: 50px; text-align: center;">SW</td> <td style="width: 50px; height: 50px; text-align: center;">SE</td> </tr> </table> <div style="text-align: center;">S</div> <div style="display: flex; justify-content: space-between; width: 100%;"> W E </div>		NW	NE	X		SW	SE	WELL'S STATIC WATER LEVEL 9.01 ft.																																	
		NW	NE																																						
		X																																							
		SW	SE																																						
WELL WAS USED AS:																																									
<div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other </div> </div>																																									
Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> X																																									
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																																									
Blank casing diameter 2.375 in. Was casing pulled? Yes <input checked="" type="checkbox"/> X No <input type="checkbox"/> If yes, how much? 3'																																									
Casing height above or below land surface Unknown in.																																									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Gravel/Concrete																																									
Grout Plug Intervals From 16.50 ft. to 3.0 ft. From 3.0 ft. to 1.0 ft. From 1.0 ft. to 0.0 ft.																																									
What is the nearest source of possible contamination:																																									
1 Septic tank 6 Seepage pit 11 Fuel storage (former) 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/ Gas well																																									
Direction from well? N/A How many feet? 0																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0.0</td> <td>1.0</td> <td></td> <td>Concrete</td> </tr> <tr> <td>1.0</td> <td>3.0</td> <td></td> <td>Gravel</td> </tr> <tr> <td>3.0</td> <td>16.5</td> <td></td> <td>Bentonite chips</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> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	CODE	PLUGGING MATERIALS	0.0	1.0		Concrete	1.0	3.0		Gravel	3.0	16.5		Bentonite chips																				
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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/yr) 05/26/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 06/10/08 under the business name of Quad State Services, Inc. by (signature) <i>[Signature]</i>																																									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																									