

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>Cowley</u>	<u>NW 1/4 SE 1/4 SE 1/4</u>	<u>32</u>	<u>31</u>	<u>7E</u>

Distance and direction from nearest town or city street address of well if located within city?  
3 MILES EAST AND 1 MILE SOUTH AND 1/2 EAST OF BURDEN, KS

2 WATER WELL OWNER: CITY OF BURDEN  
 Well # 2  
 RR#, St. Address, Box #: P.O. Box 37 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: BURDEN, KANS 67019 Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
 N

	N W	N E
W		E
	S W	S E
		S

X is located in the SE corner of the SW section.

4 DEPTH OF WELL.....32.....ft.  
 WELL'S STATIC WATER LEVEL.....16.....ft.  
 WELL WAS USED AS:  
 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.....  
 Was a chemical/bacteriological sample submitted to Department? Yes....No.. X.  
 If yes, mo/day/yr sample was submitted.....  
 Water Well Disinfected: Yes.. X.. 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

Blank casing diameter...12...in.    Was casing pulled? Yes..... No.. X.. If yes, how much.....  
 Casing height above or below land surface...36...Above...in.

6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout    3 Bentonite    4 Other. HULLS  
 Grout Plug Intervals: From 32..ft. to 0..ft., From 32..ft. to 0..ft., From 32..ft. to 0..ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank                      6 Seepage pit                      11 Fuel storage                      16 Other (specify below)  
 2 Sewer lines                      7 Pit privy                          12 Fertilizer storage  
 3 Watertight sewer lines        8 Sewage lagoon                    13 Insecticide storage              GROUND WATER  
 4 Lateral lines                      9 Feedyard                          14 Abandoned water well        CONTAMINATION  
 5 Cess Pool                          10 Livestock pens                  15 Oil well/Gas well

Direction from well? AROUND WELL                      How many feet? 8 ft

FROM	TO	PLUGGING MATERIALS
32	0	30 SACKS 60/40 POZ MIX CEMENT
		100 LBS GEL.
		1 SACK HULLS

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-13-95..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 5495..... This Water Well Record was completed on (mo/day/year) 11/13/95..... under the business name of MAC PHERSON DEL.....  
 by (signature) [Signature]

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.

Attn: R. Harper