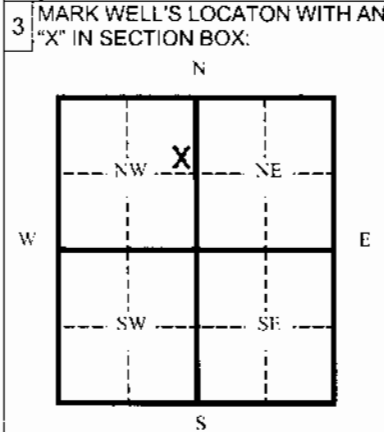


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Cowley	SE 1/4 NE 1/4 NW 1/4	33	32 S	4 E

Distance and direction from nearest town or city street address of well if located within city?
2126 South Main Street; Winfield, KS (T&C #35)

2 WATER WELL OWNER: **Town & Country**
 RR#, St. Address, Box # **PO Box 17087** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Wichita, KS 67209** Application Number:



4 DEPTH OF WELL 19 ft.
 WELL'S STATIC WATER LEVEL 12 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 (domestic) 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 ___ No 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 in. Was casing pulled? Yes X No ___ If yes, how much Drilled Out to 20 feet
 Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Plug Intervals From 0 ft. to 20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ 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 T&C #35 Lust Site
 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? East How many feet? 50

FROM	TO	CODE	PLUGGING MATERIALS
0	20		Bentonite

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 8/2/2006 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 416 This Water Well Record was completed on (mo/day/yr) 12/7/2006 under the business name of Terracon Consultants, Inc.
 by (signature) _____

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.