

1	LOCATION OF WATER WELL:	Fraction <u>S 2</u>	Section Number <u>31</u>	Township Number <u>5</u>	Range Number <u>9</u>
County: <u>Marshall</u>		<u>1/4 1/4 1/4</u>			

Distance and direction from nearest town or city street address of well if located within city?  
Frankfort is 9 mi North and 2 1/2 East

2 WATER WELL OWNER: Richard Bartels  
 RR#, St. Address, Box #: 730 13th Road Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Marionville MO 64503 Application Number:

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

N			
	N W		N E
W			E
	S W	X	S E
S			

4 DEPTH OF WELL.....79.....ft.  
 WELL'S STATIC WATER LEVEL...30.....ft. to Water  
 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...  
 If yes, mo/day/yr sample was submitted.....  
 Water Well Disinfected: Yes... No.....

5 TYPE OF BLANK CASING USED:

<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 9 Other (specify below)
<input type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 8 Concrete Tile	

Blank casing diameter...6...in. Was casing pulled? Yes... No..... If yes, how much...6 feet..  
 Casing height above or below land surface...12.....in.

6 GROUT PLUG MATERIAL:  1 Neat cement     2 Cement grout     3 Bentonite     4 Other.....  
 Grout Plug Intervals: From 6..ft. to 3...ft., From.....ft. to .....ft., From..... 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    Field Run-off  
 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? located in field    How many feet? All Sides.....

FROM	TO	PLUGGING MATERIALS
<u>79'</u>	<u>30'</u>	<u>Chlorinated Sand</u>
<u>30'</u>	<u>6'</u>	<u>Clay Soil</u>
<u>6'</u>	<u>3'</u>	<u>Bentonite Plug Grade</u>
<u>3'</u>	<u>0'</u>	<u>Topsoil</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 03/26/98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. landowner This Water Well Record was completed on (mo/day/year) 03/26/98 under the business name of Marshall Co. Conservation Dist. by (signature) W. Marshall W. Marshall W. Marshall

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.