

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Jackson	SW 1/4 SE 1/4 SW 1/4	3	7-S	15 EW

Distance and direction from nearest town or city street address of well if located within city?
115 E 5th St. Holton, KS

2	WATER WELL OWNER: Ken's Corner	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: 115 E 5th St	Application Number:
	City, State, ZIP Code : Holton, KS 66436	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 29.45 ft.
		WELL'S STATIC WATER LEVEL 27.34 ft.	
		WELL WAS USED AS:	
		1 Domestic	5 Public Water Supply
		2 Irrigation	6 Oil Field Water Supply
		3 Feedlot	7 Domestic (Lawn & Garden)
		4 Industrial	8 Air Conditioning
			9 Dewatering
			10 Monitoring Well
			11 Injection Well
			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:
	<input 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 checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 8 Concrete Tile
	Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much All
	Casing height above or below land surface (.2) in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
	Grout Plug Intervals: From 20 ft. to .5 ft., From ft. to ft., From to ft.
	What is the nearest source of possible contamination:
	<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 11 Fuel storage 16 Other (specify below) <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 12 Fertilizer storage Driveway <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 13 Insecticide storage <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 15 Oil well/Gas well
	Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
20	.5	Bentonite Chips
.5	0	Quick Crete

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4-07-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 . This Water Well Record was completed on (mo/day/year) 4-11-05 under the business name of Pratt Well Environmental by (signature) <i>[Signature]</i>
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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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.