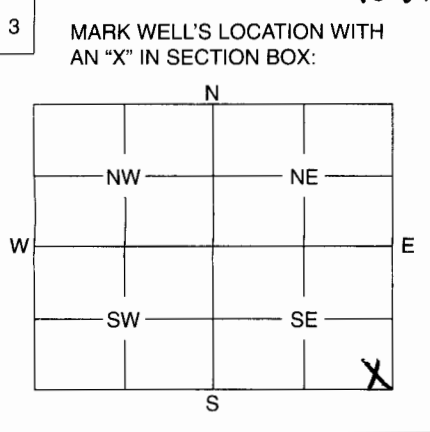


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Atchison	1/4 SE 1/4 SE 1/4 SE	5	7	17 EW

Distance and direction from nearest town or city street address of well if located within city?
 300' West of corner of Barton Rd & Forest Ave in Arrington, KS

2	WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #:	Marilyn Snider 244 Barton Rd	Application Number:
City, State, ZIP Code :	Holtton KS 66436	



4	DEPTH OF WELL	9 ft.
	WELL'S STATIC WATER LEVEL	5 ft.
WELL WAS USED AS:		
<input checked="" type="radio"/> 1 Domestic	<input type="radio"/> 5 Public Water Supply	<input type="radio"/> 9 Dewatering
<input type="radio"/> 2 Irrigation	<input type="radio"/> 6 Oil Field Water Supply	<input type="radio"/> 10 Monitoring Well
<input type="radio"/> 3 Feedlot	<input type="radio"/> 7 Domestic (Lawn & Garden)	<input type="radio"/> 11 Injection Well
<input type="radio"/> 4 Industrial	<input type="radio"/> 8 Air Conditioning	<input type="radio"/> 12 Other
Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>		
If yes, mo/day/yr sample was submitted		
Water Well Disinfected: Yes <input checked="" type="checkbox"/> 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	rock
	Blank casing diameter in.		Was casing pulled? Yes No <input checked="" type="checkbox"/>		If yes, how much
	Casing height above or below land surface 0 in.				

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="radio"/> 3 Bentonite	4 Other
	Grout Plug Intervals:	From 6 ft.	to 4 ft.,	From ft.	to ft., From to ft.
What is the nearest source of possible contamination:					
<input checked="" type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 11 Fuel storage	<input type="checkbox"/> 16 Other (specify below)		
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 12 Fertilizer storage			
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 13 Insecticide storage			
<input checked="" 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? East & West, 1-2'		How many feet? 1-2'			

FROM	TO	PLUGGING MATERIALS
9'	6'	Sand
6'	4'	Bentonite
4'	0'	Top soil

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 04-14-2008 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 04-14-2008 under the business name of Strader Drilling Co., Inc. This Water Well Record was completed on (mo/day/year) by (signature) _____
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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.