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|---|--|--|----------------------|-----------------------|--------------------|----|
| 1 | LOCATION OF WATER WELL: County: XXX Pottawatomie | Fraction NE $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$ | Section Number 24 | Township Number 09 | Range Number 10 | EW |
|---|--|--|----------------------|-----------------------|--------------------|----|

Distance and direction from nearest town or city street address of well if located within city?
3.25 Miles East and .25 miles North of Louisville, KS 66547

| | | |
|---|--|--|
| 2 | WATER WELL OWNER: Donna William RR #, St. Address, Box #: 4240 Hopkins Creek Rd. City, State, ZIP Code: St. George, KS 66535 | Board of Agriculture, Division of Water Resources Application Number: |
|---|--|--|

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|---|--|---|-----------------------|--------------|------------------------------------|--------------------------|--------------------|---------------------------------|----------------------------|-------------------|------------------------------------|--------------------|----------------|
| <p>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p> <div style="text-align:center;"> </div> | <p>4 DEPTH OF WELL35'..... ft. WELL'S STATIC WATER LEVEL17'..... ft.</p> <p>WELL WAS USED AS:</p> <table style="width:100%;"> <tr> <td><input checked="" type="radio"/> 1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input type="radio"/> 2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td><input type="radio"/> 3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td><input type="radio"/> 4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> <p>Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> X If yes, mo/day/yr sample was submitted</p> <p>Water Well Disinfected: Yes <input checked="" type="checkbox"/> X No</p> | <input checked="" type="radio"/> 1 Domestic | 5 Public Water Supply | 9 Dewatering | <input type="radio"/> 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well | <input type="radio"/> 3 Feedlot | 7 Domestic (Lawn & Garden) | 11 Injection Well | <input type="radio"/> 4 Industrial | 8 Air Conditioning | 12 Other |
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| <input type="radio"/> 4 Industrial | 8 Air Conditioning | 12 Other | | | | | | | | | | | |

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter in. Was casing pulled? Yes No If yes, how much

Casing height above or below land surface in.

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

Grout Plug Intervals: From 4.5' ft. to 5' ft., From ft. to ft., From to

What is the nearest source of possible contamination:

| | | | |
|--------------------------|-------------------|-------------------------|---|
| 1 Septic tank | 6 Seepage pit | 11 Fuel storage | <input checked="" type="radio"/> 16 Other (specify below) |
| 2 Sewer lines | 7 Pit privy | 12 Fertilizer storage | County Rd. |
| 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? S How many feet? 40'

| FROM | TO | PLUGGING MATERIALS |
|------|------|--------------------|
| 35' | 17' | clean fill sand |
| 17' | 5' | Rocks and soil |
| 5' | 4.5' | Sodium Bentonite |
| 4.5' | +1 | Clean soil |
| | | |
| | | |
| | | |

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/08/2010 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 4/09/2010 This Water Well Record was completed on (mo/day/year) 4/09/2010 under the business name of Pottawatomie Co. Environmental Health Dept. by (signature) Scott Schwinn, R.S.

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.