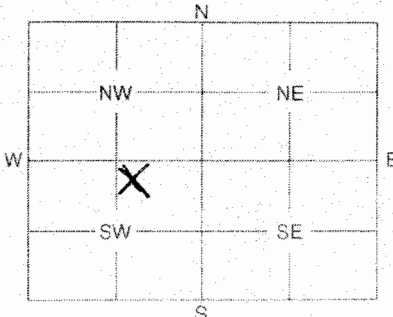


1	LOCATION OF WATER WELL: Riley	Fraction NW NE SW 1/4 1/4 1/4	Section Number 1	Township Number 9S	Range Number 5E	E/W
County: Riley						

Distance and direction from nearest town or city street address of well if located within city?

City of Riley 204 S. Remele


2	WATER WELL OWNER: KDHE UST Time and Materials 1000 SW Jackson #410 RR #, St. Address, Box #: Topeka, Ks 66612-1367 City, State, ZIP Code	Board of Agriculture, Division of Water Resources Application Number:
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4	DEPTH OF WELL ..... 8 ..... ft. WELL'S STATIC WATER LEVEL ..... NA ..... ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other ..... Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> X If yes, mo/day/yr sample was submitted ..... Water Well Disinfected: Yes ..... No <input checked="" type="checkbox"/> X
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5	TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (Specify below)	Blank casing diameter ..... 2 ..... in. Casing height above or below land surface ..... in.	Was casing pulled? Yes ..... No <input checked="" type="checkbox"/> X If yes, how much .....
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6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other: concrete	Grout Plug Intervals: From 3 ft. to 8 ft. to 1 ft. From 4 ft. to 1 ft. to 0 ft.	What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
Direction from well? ..... How many feet? .....			

FROM	TO	PLUGGING MATERIALS
8	1	Bentonite
1	0	Concrete

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 08/08/2008 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/year) 08/27/08 under the business name of Associated Environmental, Inc. 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.