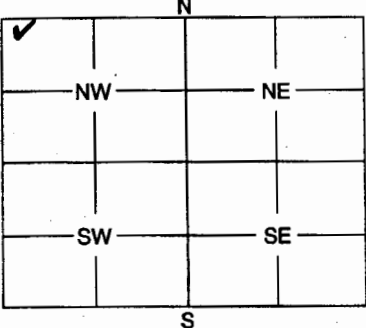


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Gove		NW 1/4 NW 1/4 NW 1/4	32	11	26 EW

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

I-70 and K-212 QUINTER KANSAS

2	WATER WELL OWNER: <b>Jim Graham</b> <b>P O Box 398</b> RR #, St. Address, Box #: City, State, ZIP Code : <b>Quinter, KS 67752</b>	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 <u>93.42</u> ft. WELL'S STATIC WATER LEVEL <u>74.43</u> ft. WELL WAS USED AS: <table><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Domestic (Lawn &amp; Garden)</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other ASP-5</td></tr></table> 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 ..... No <input checked="" type="checkbox"/>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other ASP-5
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4 Industrial	8 Air Conditioning	12 Other ASP-5													

5	TYPE OF BLANK CASING USED: <table><tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (Specify below)</td></tr><tr><td><input checked="" type="checkbox"/> 2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr></table> Blank casing diameter <u>2</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No ..... If yes, how much <u>3 feet</u> Casing height above or below land surface <u>36</u> in.	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	<input checked="" type="checkbox"/> 2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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6	GROUT PLUG MATERIAL: <table><tr><td>1 Neat cement</td><td>2 Cement grout</td><td><input checked="" type="checkbox"/> 3 Bentonite</td><td>4 Other .....</td></tr></table> Grout Plug Intervals: From <u>.75</u> ft. to <u>93.42</u> ft., From ..... ft. to ..... ft., From ..... to ..... ft. What is the nearest source of possible contamination: <table><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td><input checked="" type="checkbox"/> 11 Fuel storage</td><td>16 Other (specify below)</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td></td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr></table> Direction from well? ..... How many feet? .....	1 Neat cement	2 Cement grout	<input checked="" type="checkbox"/> 3 Bentonite	4 Other .....	1 Septic tank	6 Seepage pit	<input checked="" type="checkbox"/> 11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage		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	
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FROM	TO	PLUGGING MATERIALS
0	8"	Asphalt millings
8"	93.42	bentonite grout

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>07-24-06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>735</u> This Water Well Record was completed on (mo/day/year) <u>07-28-06</u> under the business name of <u>MILCO Environmental Services, Inc.</u> by (signature) <u>[Signature]</u>
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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.