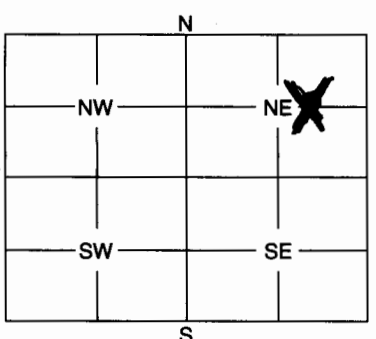


1 LOCATION OF WATER WELL: Fraction NE 1/4 Section Number 12 Township Number 12 Range Number 18 EW  
 County: ELLIS

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

2 WATER WELL OWNER: JESSIE IRWIN  
 RR #, St. Address, Box #: 2389 280 AVE Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: HAYS KS 67601 Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF WELL 82 ft.  
 WELL'S STATIC WATER LEVEL 22 ft.  
 WELL WAS USED AS:  
 Domestic      5 Public Water Supply      9 Dewatering  
 Irrigation      6 Oil Field Water Supply      10 Monitoring Well  
 Feedlot      7 Domestic (Lawn & Garden)      11 Injection Well  
 Industrial      8 Air Conditioning      12 Other .....  
 Was a chemical / bacteriological sample submitted to Department? Yes ..... No   
 If yes, mo/day/yr sample was submitted .....  
 Water Well Disinfected: Yes  No .....

5 TYPE OF BLANK CASING USED:  
 1 Steel      3 RMP (SR)      5 Wrought      7 Fiberglass      9 Other (Specify below)  
 PVC      4 ABS      6 Asbestos-Cement      8 Concrete Tile  
 Blank casing diameter 4 in.      Was casing pulled? Yes ..... No  If yes, how much .....  
 Casing height above or below and surface 36 in.

6 GROUT PLUG MATERIAL: 1 Neat cement      2 Cement grout       Bentonite      4 Other .....  
 Grout Plug Intervals: From 60 ft. to 3 ft., From ..... ft. to ..... ft., From ..... to ..... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank      6 Seepage pit      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  
 Direction from well? ..... How many feet? .....

FROM	TO	PLUGGING MATERIALS
<u>82'</u>	<u>60'</u>	<u>Sand</u>
<u>60'</u>	<u>6'</u>	<u>Natural Fill</u>
<u>6'</u>	<u>3'</u>	<u>Bentonite</u>
<u>3'</u>	<u>0'</u>	<u>Bentonite Mushroom Cap &amp; Natural Fill.</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/year) .....  
 by (signature) Dem Kailin under the business name of CK Earthworks LLC

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.