KSA 82a-1212

Range Number LOCATION OF WATER WELL: Section Number Township Number Fraction 34 Russell NW NW NE 13 14 County: Distance and direction from nearest town or city street address of well if located within city? 53 S. Lincoln Street, Russell, Ks 67665 2 WATER WELL OWNER: Allied Cementing, Co., Inc. RR #, St. Address, Box #: P.O. Box 31 Board of Agriculture, Division of Water Resources City, State, ZIP Code Application Number: Russell, Ks 67665 DEPTH OF WELL ...... 15.53 ...... ft. 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL .8.13 .... ft. WELL WAS USED AS: K 1 Domestic 5 Public Water Supply 9 Dewatering NE MARA 10) Monitoring Well 6 Oil Field Water Supply 2 Irrigation 7 Domestic (Lawn & Garden) 11 Injection Well 3 Feedlot -12 Other ..... W 4 Industrial 8 Air Conditioning SE If yes, mo/day/yr sample was submitted ..... Water Well Disinfected: Yes ...... No .X S TYPE OF BLANK CASING USED: 5 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) Steel 6 Asbestos-Cement 8 Concrete Tile 4 ABS Blank casing diameter ... ... in. Was casing pulled? Casing height above or below land surface ...... in. -≱Neat cement (3) Sentonite Other Surface silts and clays 2 Cement grout 6 From 15,53 ft to .....5 ..... ft. Grout Plug Intervais: What is the nearest source of possible contamination: (18) Other (specify below) 6 Seepage pir 11 Fuel storage 1 Septicitank 2 Sewer lines 7. Pit privy 12 Fertilizer storage 8 Sewage lagoon 13 Insecticide storage 3 Waterlight sewer lines 14 Abandoned water well 4 Lateral lines 9 Feedyard 5 Cess pool 15 Oil well/Gas well 10 Livestock pens How many feet? ...... Direction from well? PLUGGING MATERIALS FROM TO Bentonite .5 15.53 Surface silts/clays 0 .5 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. 585 This Water Well Record was completed on (mo/day/year) This Water Well Record was completed on (mo/day/year) under the business name of Associated Environmental, Inc. INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, the rine of Grote 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.