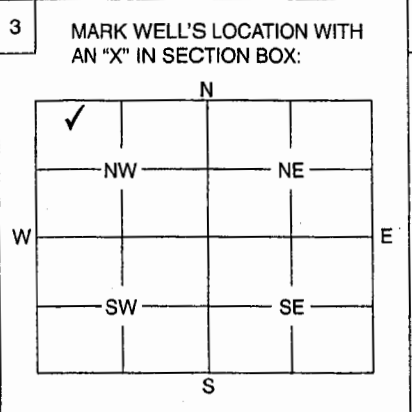


1	LOCATION OF WATER WELL: County: <b>Ellis</b>	Fraction <b>NW ¼ NW ¼ NW ¼</b>	Section Number <b>34</b>	Township Number <b>13</b>	Range Number <b>18</b>	<input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Distance and direction from nearest town or city street address of well if located within city?  
 2601 Vine Street - Hays, Kansas

2	WATER WELL OWNER: <b>ASB Oil</b> c/o Warren Foskett RR #, St. Address, Box #: <b>9425 Hun Blvd</b> City, State, ZIP Code: <b>Kansas City, MO 64133</b>	Application Number: <b>Board of Agriculture, Division of Water Resources</b>
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4	DEPTH OF WELL <b>64.40</b> ft. WELL'S STATIC WATER LEVEL <b>57.75</b> 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 <b>MW-25</b> 11 Injection Well 12 Other .....	
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"/>	

5	TYPE OF BLANK CASING USED:
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	
Blank casing diameter <b>2</b> in.    Was casing pulled? Yes <input checked="" type="checkbox"/> No .....    If yes, how much <b>3'</b>	
Casing height above or below land surface <b>40</b> in.	

6	GROUT PLUG MATERIAL:    1 Neat cement    2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite    4 Other .....
Grout Plug Intervals: From <b>0.5</b> ft. to <b>64.40</b> ft., From .....ft. to .....ft., From ..... to .....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    16 Other (specify below) 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well	
Direction from well? <b>NW</b> How many feet? <b>200</b>	

FROM	TO	PLUGGING MATERIALS
0	0.5	concrete
0.5	64.40	Bentonite slurry

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>1-28-08</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>735</b> This Water Well Record was completed on (mo/day/year) <b>1-29-08</b> under the business name of <b>MILCO Environmental Services, Inc.</b> 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.