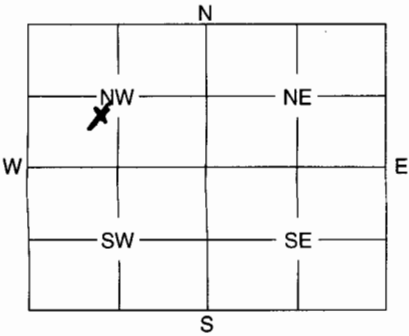


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Ellis	NW SE 1/4 NW 1/4	27	13 S	18 W EW

Distance and direction from nearest town or city street address of well if located within city?
 2220 Canterbury Dr

2	WATER WELL OWNER: HAYS Med Center	RR #, St. Address, Box #: P.O 8100	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code: HAYS KS 67401		Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 39 ft.
			WELL'S STATIC WATER LEVEL 27 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"/>
			If yes, mo/day/yr sample was submitted
			Water Well Disinfected: Yes <input checked="" type="checkbox"/> No

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 5 in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much
	Casing height above or below land surface 60 in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
	Grout Plug Intervals: From 27 ft. to 5 ft., From 5 ft. to ft., From ft. 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 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
39	27	GRAVEL
27	5	Bentonite
5	0	CLAY

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3-15-10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 624 This Water Well Record was completed on (mo/day/year) 3-17-10 under the business name of TOWN & COUNTRY WATER WELL SERV by (signature) [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.