

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Saline	NW¼ NW ¼ SW ¼	36	13	3

Distance and direction from nearest town or city street address of well if located within city?
 120 W. Diamond Drive, Salina

2	WATER WELL OWNER: Triplett Inc. RR #, St. Address, Box #: PO Box 647 City, State, ZIP Code : Salina, KS 67402	Board of Agriculture, Division of Water Resources Application Number:
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<p>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p> <div style="text-align: center;"> <p>N</p> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> <tr> <td style="text-align:center;">NW</td> <td style="text-align:center;">NE</td> <td style="text-align:center;">SE</td> <td style="text-align:center;">SW</td> </tr> <tr> <td style="text-align:center;">W</td> <td style="text-align:center;">X</td> <td style="text-align:center;">E</td> <td style="text-align:center;">S</td> </tr> </table> </div>					NW	NE	SE	SW	W	X	E	S	<p>4 DEPTH OF WELL28..... ft.</p> <p>WELL'S STATIC WATER LEVELN/A..... ft.</p> <p>WELL WAS USED AS:</p> <table style="width:100%;"> <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>● Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> <p>Was a chemical / bacteriological sample submitted to Department? Yes No✓..... If yes, mo/day/yr sample was submitted</p> <p>Water Well Disinfected: Yes No✓.....</p>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	● Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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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 diameter2..... in. Was casing pulled? Yes✓..... No If yes, how much10' *.....
 Casing height above or below land surfacen/a..... in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ● Bentonite ● Other ..Concrete.....

Grout Plug Intervals: From0..... ft. to1..... ft., From1..... ft. to28..... 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
0	1	Concrete
1	20	Bentonite (8")
20	28	Bentonite (2")

*Drilled out to 20'

MW7

GeoCore #338 / KDHE #U5 085 01015

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)10/23/2006..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.527..... This Water Well Record was completed on (mo/day/year)10/28/2006..... under the business name of GEORGE INC.....
 by (signature)*George Inc*.....

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 66612-1967. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.