

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Ellsworth	SE ¼ SE ¼ SW ¼	18	14	10 EW

Distance and direction from nearest town or city street address of well if located within city?
50' south & 50' west of the intersection of 23rd st. & Avenue I, city of Wilson, KS

2	WATER WELL OWNER: Gerald Burkhead RR #, St. Address, Box #: 2304 Avenue I City, State, ZIP Code : Wilson, KS 67490	Board of Agriculture, Division of Water Resources Application Number:
---	---	--

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align:center;"> </div>	4 DEPTH OF WELL 35 ft. WELL'S STATIC WATER LEVEL -- ft. WELL WAS USED AS: <table style="width:100%;"> <tr> <td><input checked="" type="radio"/> 1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input type="radio"/> 2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td><input type="radio"/> 3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td><input type="radio"/> 4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted	<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering	<input type="radio"/> 2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	<input type="radio"/> 3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	<input type="radio"/> 4 Industrial	8 Air Conditioning	12 Other
<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering											
<input type="radio"/> 2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well											
<input type="radio"/> 3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well											
<input type="radio"/> 4 Industrial	8 Air Conditioning	12 Other											

5	TYPE OF BLANK CASING USED:	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass <input checked="" type="radio"/> 9 Other (Specify below) Galvanized Metal 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
	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 24 in.	below

6	GROUT PLUG MATERIAL:	1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other Grout Plug Intervals: From 25 ft. to 20 ft., From 8 ft. to 3 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 <input checked="" type="radio"/> 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? North	How many feet? 40

FROM	TO	PLUGGING MATERIALS
35	25	Fill Sand
25	20	Bentonite
20	8	Fill Sand
8	3	Bentonite
3	0	Topsoil

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-04-2005 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) 11-07-05 under the business name of Ellsworth County NPS Coordinator by (signature) <i>Gerald Burkhead</i>
---	--

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.