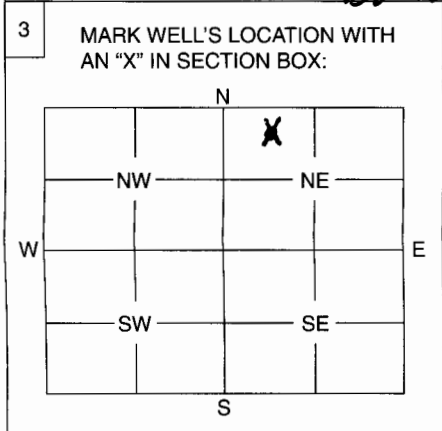


|   |                         |                             |                |                 |               |
|---|-------------------------|-----------------------------|----------------|-----------------|---------------|
| 1 | LOCATION OF WATER WELL: | Fraction                    | Section Number | Township Number | Range Number  |
|   | County: <u>Russell</u>  | <u>NE 1/4 NW 1/4 NW 1/4</u> | <u>14</u>      | <u>14</u>       | <u>12</u> E/W |

Distance and direction from nearest town or city street address of well if located within city?  
2 miles West of Dorrance

|   |  |   |
|---|--|---|
| 2 | WATER WELL OWNER: <u>John Lawrence</u>           | Board of Agriculture, Division of Water Resources |
|   | RR #, St. Address, Box #: <u>19766 Grand Rd</u>  | Application Number:                               |
|   | City, State, ZIP Code: <u>Dorrance, KS 67634</u> |   |



|   |   |                    |
|---|---|--------------------|
| 4   | DEPTH OF WELL ..... <u>93</u> ..... ft.             |                    |
|   | WELL'S STATIC WATER LEVEL ..... <u>86</u> ..... ft. |                    |
| WELL WAS USED AS:   |   |                    |
| <input checked="" type="radio"/> Domestic   | 5 Public Water Supply                               | 9 Dewatering       |
| 2 Irrigation  | 6 Oil Field Water Supply                            | 10 Monitoring Well |
| 3 Feedlot   | 7 Domestic (Lawn & Garden)                          | 11 Injection Well  |
| 4 Industrial  | 8 Air Conditioning                                  | 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: |                   |                 |                         |
| <input checked="" type="radio"/> Steel   | 3 RMP (SR)                 | 5 Wrought         | 7 Fiberglass    | 9 Other (Specify below) |
| 2 PVC  | 4 ABS                      | 6 Asbestos-Cement | 8 Concrete Tile |                         |
| Blank casing diameter <u>6</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No ..... If yes, how much <u>48"</u> |                            |                   |                 |                         |
| Casing height above or below land surface <u>48</u> in.  |                            |                   |                 |                         |

|   |                      |                         |                          |  |               |
|---|----------------------|-------------------------|--------------------------|--|---------------|
| 6   | GROUT PLUG MATERIAL: | 1 Neat cement           | 2 Cement grout           | <input checked="" type="radio"/> Bentonite | 4 Other ..... |
| Grout Plug Intervals: From <u>7</u> ft. to <u>4</u> ft., From ..... ft. to ..... ft., From ..... to ..... ft. |                      |                         |                          |  |               |
| What is the nearest source of possible contamination:   |                      |                         |                          |  |               |
| <input checked="" type="radio"/> 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  |                          |  |               |
| <input checked="" type="radio"/> Lateral lines  | 9 Feedyard           | 14 Abandoned water well |                          |  |               |
| 5 Cess pool   | 10 Livestock pens    | 15 Oil well/Gas well    |                          |  |               |
| Direction from well? <u>South</u> How many feet? <u>20'</u>   |                      |                         |                          |  |               |

| FROM       | TO         | PLUGGING MATERIALS                      |
|------------|------------|---|
| <u>93'</u> | <u>78'</u> | <u>SAND</u>                             |
| <u>78'</u> | <u>7'</u>  | <u>Compacted Clays</u>                  |
| <u>7'</u>  | <u>4'</u>  | <u>Bentonite</u>                        |
| <u>4'</u>  | <u>0</u>   | <u>Compacted Clays - casing removed</u> |
|            |            |   |
|            |            |   |

RECEIVED  
 OCT 13 2006  
 BUREAU OF WATER

|   |  |
|---|--|
| 7 | CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>10/8/06</u> 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) ..... |
|   | by (signature) <u>John Lawrence</u>  |

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.