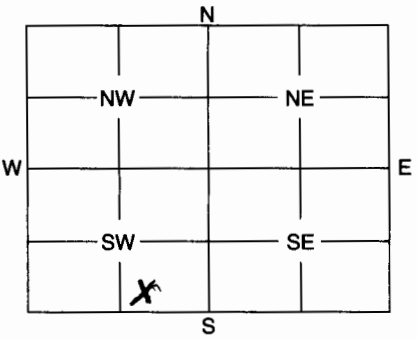


1	LOCATION OF WATER WELL: County: <u>Russell</u>	Fraction <u>SE 1/4 SW 1/4</u>	Section Number <u>19</u>	Township Number <u>14 S</u>	Range Number <u>15 W</u>
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Distance and direction from nearest town or city street address of well if located within city?

2	WATER WELL OWNER: <u>Melvin Janne</u> RR #, St. Address, Box #: City, State, ZIP Code : <u>17527 4corners Rd</u>	Board of Agriculture, Division of Water Resources Application Number:
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4	DEPTH OF WELL <u>50</u> ft. WELL'S STATIC WATER LEVEL <u>3</u> ft. WELL WAS USED AS: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Oil Field Water Supply <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Dewatering <input type="checkbox"/> Monitoring Well <input type="checkbox"/> Injection Well <input type="checkbox"/> Other
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Was a chemical / bacteriological sample submitted to Department? Yes No
If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No

5	TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass <input checked="" type="checkbox"/> Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile <u>Hand dug</u> <u>Rock lined</u>
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Blank casing diameter in. Was casing pulled? Yes No If yes, how much
Casing height above or below land surface in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other
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Grout Plug Intervals: From ft. to ft., From 6' ft. to 5' ft., From to

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
<u>50'</u>	<u>47'</u>	<u>Sand</u>
<u>47</u>	<u>6</u>	<u>Fill dirt</u>
<u>6</u>	<u>5</u>	<u>Bentonite</u>
<u>5</u>	<u>0</u>	<u>Blk dirt</u>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>9-15-09</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) under the business name of by (signature) <u>Rich Janne</u>
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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.