

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>SALINE</u>	<u>SW 1/4 NE 1/4 NW 1/4</u>	<u>16</u>	<u>14S</u>	<u>2W</u>

Distance and direction from nearest town or city street address of well if located within city?  
3256 E. COUNTRY CLUB RD., SALINA, KS 67401

2 WATER WELL OWNER: EXLINE, INC.  
 RR#, St. Address, Box #: 3256 E. COUNTRY CLUB RD. Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : SALINA, KS 67401 Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
 N

N	X	E
W		E
S		E

S

4 DEPTH OF WELL 59 ft.  
 WELL'S STATIC WATER LEVEL 27.5 ft.  
 WELL WAS USED AS:  
 1 Domestic      5 Public Water Supply      8 Dewatering  
 2 Irrigation    6 Oil Field Water Supply    10 Monitoring Well  
 3 Feedlot       7 Lawn and Garden Only    11 Injection Well  
 4 Industrial    8 Air Conditioning        12 Other.....  
 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    9 Other (specify below)  
 2 PVC    4 ABS        6 Asbestos-Cement    8 Concrete Tile  
 Blank casing diameter 2 in.    Was casing pulled? Yes... No..... If yes, how much 3.5'  
 Casing height above or below land surface 18' in.

6 GROUT PLUG MATERIAL: 1 Neat cement    2 Cement grout    3 Bentonite    4 Other.....  
 Grout Plug Intervals: From 0 ft. to 59 ft., From.....ft. to .....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    UNKNOWN  
 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? UNKNOWN    How many feet? .....

FROM	TO	PLUGGING MATERIALS
0'	20'	BENTONITE 8"
20'	59'	BENTONITE 2"

B 12

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/16/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 522 This Water Well Record was completed on (mo/day/year) ..... under the business name of GELCORE, INC.  
 by (signature) [Signature]

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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.