

| 1 | LOCATION OF WATER WELL: County: Saline | Fraction SW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$ | Section Number 11 | Township Number 14S | Range Number 3 E/W | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|--------------------------------------|--|---------------|-----------------------|--------------------|---------------|--------------------------|-----------------------|--------------------------|----------------------------|------------------------|-----------------|--------------------|-------------------------|-------------|-------------------|----------------------|--------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Distance and direction from nearest town or city street address of well if located within city? W North Street Road Salina | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | WATER WELL OWNER: UPS c/o KDHE Time and Materials RR #, St. Address, Box #: 1000 SW Jackson #410 City, State, ZIP Code : Topeka, Ks 66612-1367 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 21.2 ft. WELL'S STATIC WATER LEVEL 17.5 ft. WELL WAS USED AS: <table style="width:100%; border: none;"> <tr> <td style="width:33%;">1 Domestic</td> <td style="width:33%;">5 Public Water Supply</td> <td style="width:33%;">9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 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> | | | 1 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 | | | | | | | | | | | | | | | |
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| Was a chemical / bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | TYPE OF BLANK CASING USED: <table style="width:100%; border: none;"> <tr> <td style="width:16%;">1 Steel</td> <td style="width:16%;">3 RMP (SR)</td> <td style="width:16%;">5 Wrought</td> <td style="width:16%;">7 Fiberglass</td> <td style="width:36%;">9 Other (Specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> | | | | | 1 Steel | 3 RMP (SR) | 5 Wrought | 7 Fiberglass | 9 Other (Specify below) | 2 PVC | 4 ABS | 6 Asbestos-Cement | 8 Concrete Tile | | | | | | | | | | | | | | | | | | |
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| Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much 20' Casing height above or below land surface in. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete Grout Plug Intervals: From 20' ft. to 3 ft., From 3 ft. to 0 ft., From to ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| What is the nearest source of possible contamination: <table style="width:100%; border: none;"> <tr> <td style="width:33%;">1 Septic tank</td> <td style="width:33%;">6 Seepage pit</td> <td style="width:33%;">11 Fuel storage</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> </tr> <tr> <td colspan="3">16 Other (specify below)</td> </tr> </table> | | | | | | 1 Septic tank | 6 Seepage pit | 11 Fuel storage | 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 | 16 Other (specify below) | | | | | | | | | | | |
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| Direction from well? How many feet? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 7 | CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 06/22/04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/year) 07/07/04 under the business name of Associated Environmental, Inc. by (signature) Darin Duncan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |