

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Saline	NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	24	14	3 E/W

Distance and direction from nearest town or city street address of well if located within city?
701 S. Ninth Street, Salina

2	WATER WELL OWNER: BOB OTT
	RR #, St. Address, Box #: P.O. Box 707 City, State, ZIP Code : Salina, KS 67402
	Board of Agriculture, Division of Water Resources Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 50.1 ft. WELL'S STATIC WATER LEVEL N/A ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply ● 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 If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <div style="text-align: center;"> </div>
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5	TYPE OF BLANK CASING USED:
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) ● PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much Casing height above or below land surface 0 in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ● Bentonite 4 Other Grout Plug Intervals: From 3 ft. to 50.1 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 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?
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FROM	TO	PLUGGING MATERIALS
0	1	Concrete
1	3	Native soil
3	50.1	Bentonite (2")

MW2

KDHE #U5 085 00349

GeoCore #36

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/1/2007 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/year) 5/3/2007 under the business name of Geocore, Inc. by (signature) <i>Bob Ott</i>
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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.