

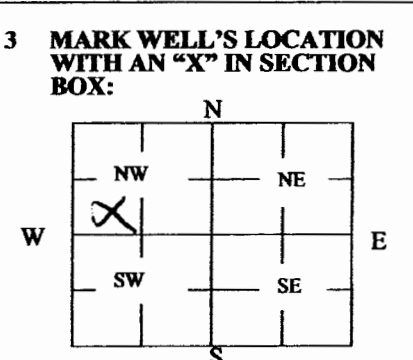
1 LOCATION OF WATER WELL: Fraction SE 1/4 SW 1/4 NW 1/4 Section Number 12 Township Number T 14 S Range Number 3 E W
 County: SALINE

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 501 North Santa Fe Salina KS 67401

Global Positioning Systems (GPS) information:
 Latitude: 38° 50' 56" N (in decimal degrees)
 Longitude: 97° 36' 34" W (in decimal degrees)
 Elevation: 1221'
 Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: MATADOR CATTLE CO
 RR#, St. Address, Box #: 4111 E. 37th St N.
 City, State ZIP Code: Wichita KS 67220

GPS unit (Make/Model: I-Phone)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m



4 DEPTH OF WELL 36' ft.
 WELL'S STATIC WATER LEVEL 32' ft.
 WELL WAS USED AS:
 Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other _____
 Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Wrought Fiberglass Other (Specify below) STAINLESS STEEL
 PVC ABS Asbestos-Cement Concrete Tile
 Blank casing diameter 2" in. Was casing pulled? Yes No If yes, how much 36'
 Casing height above or below land surface 0' in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other CLASS H / SILICA FLOW GROUT
 Grout Plug Intervals: From 0' ft. to 5' ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel storage Other (specify below) NA
 Sewer lines Pit privy Fertilizer storage
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well Direction from well? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>0'</u>	<u>5'</u>	<u>CLASS H / SILICA FLOW GROUT</u>			
<u>5'</u>	<u>36'</u>	<u>SAND</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/15/2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 793. This Water Well Record was completed on (mo/day/year) 9/22/14 under the business name of Cahoy Pump Service by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

