

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Ellsworth		NW ¼ NW ¼ NW ¼	36	14	8 W

Distance and direction from nearest town or city street address of well if located within city?

N/A

2	WATER WELL OWNER: Ramona Durbin	
RR #, St. Address, Box #: 1222 Polk St.		Board of Agriculture, Division of Water Resources
City, State, ZIP Code : Great Bend, KS 67530		Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 51 ft
		WELL'S STATIC WATER LEVEL 37 ft.	
		WELL WAS USED AS:	
		<input checked="" type="radio"/> 1 Domestic 5 Public Water Supply 9 Dewatering <input type="radio"/> 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well <input type="radio"/> 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well <input type="radio"/> 4 Industrial 8 Air Conditioning 12 Other	
Was a chemical / bacteriological sample submitted to Department? Yes No <u>X</u>			
If yes, mo/day/yr sample was submitted			
Water Well Disinfected: Yes <u>X</u> No			

5	TYPE OF BLANK CASING USED:	
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass <input checked="" type="radio"/> 9 Other (Specify below) Sandstone (Dug well) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile		
Blank casing diameter 60 in.		Was casing pulled? Yes No <u>X</u>
Casing height above or below land surface 72 in.		If yes, how much below

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other	
Grout Plug Intervals: From 7 ft. to 6 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 <input checked="" type="radio"/> 16 Other (specify below) Fertilizers & Pesticides 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? All How many feet? 20		

FROM	TO	PLUGGING MATERIALS
51	20	Chlorinated Sand
20	7	Subloil Clays
7	6	Bentonite
6	0	Topsoil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12-14-2001 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) 12-18-2001 under the business name of Ellsworth County NPS Coordinator by (signature) Brad Krater	
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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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.