

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>Saline</u>	<u>SE4 SE ¼ SW ¼</u>	<u>17</u>	<u>15</u>	<u>3</u> EW

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

402 E. North St., Smolan

2	WATER WELL OWNER: <u>Philip L. Nelson</u> RR #, St. Address, Box #: <u>220 S. Main St.</u> City, State, ZIP Code: <u>Smolan, KS 67456</u>	Board of Agriculture, Division of Water Resources Application Number:
---	---	--

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>20</u> ft. WELL'S STATIC WATER LEVEL ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other <u>Soil vapor extr.</u> </div> </div>
---	--	---	--

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:
	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 <u>4</u> in. Was casing pulled? Yes <u>X</u> No If yes, how much <u>20'</u>
	Casing height above or below land surface <u>0</u> in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>Native soil</u>
	Grout Plug Intervals: From <u>0</u> ft. to <u>3</u> ft., From <u>3</u> ft. to <u>20</u> ft., From to ft.
	What is the nearest source of possible contamination:
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool </div> <div style="width: 33%;"> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div style="width: 33%;"> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div style="width: 33%;"> 16 Other (specify below) </div> </div>
	Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
0	3	Native soil
3	20	Bentonite (11")

SV1

KDHE #U5 085 01003

GeoCore #1291

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>11/14/2006</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>527</u> This Water Well Record was completed on (mo/day/year) <u>12/5/2006</u> under the business name of <u>GeoCore Inc.</u> by (signature) <u>Dale Holt</u>
---	--

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.