

<b>1 LOCATION OF WATER WELL:</b> County: <b>Saline</b>	Fraction 1/4 NW 1/4 SE 1/4 NW 1/4	Section Number 19	Township Number 15 S	Range Number 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance and direction from nearest town or intersection. If at owner's address, check here ☐  
  
 1/2 mi SW of Smolan, KS

**Global Positioning Systems (GPS) Information:**  
 Latitude: \_\_\_\_\_ (in decimal degrees)  
 Longitude: \_\_\_\_\_ (in decimal degrees)  
 Elevation: \_\_\_\_\_  
 Datum: ☐ WGS84 ☐ NAD83 ☐ NAD27  
 Collection Method:  
☐ GPS unit Make/Model: \_\_\_\_\_  
☐ Digital Map/Photo ☐ Topographic Map ☐ Land Survey  
 Est. Accuracy: ☐ <3 m ☐ 3-5 m ☐ 5-15 m ☐ >15 m

<b>2 WATER WELL OWNER:</b> Morrison Ventures RR#, St. Address, Box # 1700 East Iron City, State ZIP Code Salina, KS 67401	<b>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"> </div>
<b>4 DEPTH OF WELL:</b> 40 ft. <b>WELL'S STATIC WATER LEVEL:</b> 15 ft. BTOC <b>WELL WAS USED AS:</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Domestic  <input type="checkbox"/> Irrigation  <input type="checkbox"/> Feedlot  <input type="checkbox"/> Industrial         </div> <div style="width: 30%;"> <input type="checkbox"/> Public Water Supply  <input type="checkbox"/> Old Field Water Supply  <input type="checkbox"/> Domestic (Lawn/Garden)  <input type="checkbox"/> Air Conditioning         </div> <div style="width: 30%;"> <input type="checkbox"/> Dewatering  <input checked="" type="checkbox"/> Monitoring  <input type="checkbox"/> Injection Well  <input type="checkbox"/> Other _____         </div> </div> Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**5 TYPE OF BLANK CASING USED:**  

☐ Steel  
☒ PVC

☐ RMP (SR)  
☐ ABS

☐ Wrought  
☐ Asbestos/Cement

☐ Fiberglass  
☐ Concrete Tile

☐ Other: \_\_\_\_\_

 Blank casing diameter: 3/4 in. Was casing pulled? ☒ Yes ☐ No If Yes, how much 3'  
 Casing height above or below land surface: \_\_\_\_\_ in.

**6 GROUT PLUG MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other: \_\_\_\_\_  
 Grout Plug Intervals: From 3 ft. To 40 ft. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  

☐ Septic tank  
☐ Sewer lines  
☐ Watertight sewer lines  
☐ Lateral lines  
☐ Cess pool

☐ Seepage pit  
☐ Pit privy  
☐ Sewage lagoon  
☐ Feedyard  
☐ Livestock pens

☐ Fuel storage  
☐ Fertilizer storage  
☐ Insecticide storage  
☐ Abandoned water well  
☐ Oil well/Gas well

☐ Other (specify below): \_\_\_\_\_  
 Direction from well: \_\_\_\_\_  
 How many feet: \_\_\_\_\_

FROM	TO	PLUGGING MATERIAL	FROM	TO	PLUGGING MATERIAL
0	3	Native soil			
3	40	Bentonite			
					MW-2

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/3/2020 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) 1/6/2020 under the business name of GeoCore, LLC by (signature) *GeoCore, LLC*

**INSTRUCTIONS:** Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy 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>.