

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: SALINE	SE 1/4 NE 1/4 SE 1/4	14	15	4W

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

2	WATER WELL OWNER: MACDONALD ENTERPRISES
	8261 S HALSTEAD RD
	RR#, St. Address, Box #: SMOLAN, KS 67479
	City, State, ZIP Code: Board of Agriculture, Division of Water Resources
	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N S	4	DEPTH OF WELL..... 25ft. WELL'S STATIC WATER LEVEL.... 0 NONE t. WELL WAS USED AS: <input checked="" type="radio"/> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden Only 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other..... Was a chemical/bacteriological sample submitted to Department? Yes....No <input checked="" type="checkbox"/> .. If yes, mo/day/yr sample was submitted..... Water Well Disinfected: Yes..... No <input checked="" type="checkbox"/> ..
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5	TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (specify below) HAND. DUG... ROCK Blank casing diameter... 36in. Was casing pulled? Yes..... No <input checked="" type="checkbox"/> .. If yes, how much..... Casing height above or below land surface..... 360in.
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6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other..... Grout Plug Intervals: From.. 4.5 ft. to.. 5 ft., From.....ft. toft., From..... to.....ft. What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) NONE KNOWN WITHIN 1/4 MILE Direction from well? How many feet?
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FROM	TO	PLUGGING MATERIALS
25	5	SUBSOIL
5	4.5	BENTONITE
4.5	0	TOP SOIL

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/1/96 ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 511490 under the business name of MacDonald Enterprises, Inc. This Water Well Record was completed on (mo/day/year) 5/1/96 by (signature) Patrick MacDonald
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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: 913/296-3565. Send one to Water Well Owner and retain one for your records.