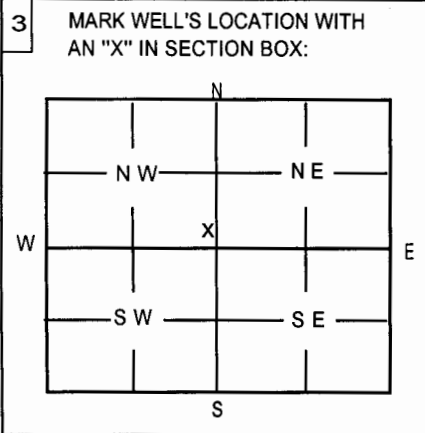


1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: Ellsworth	Se 1/4 SE 1/4 NW 1/4	8		T	15	S	R 8 E (w)

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

Approximately 1 1/2 miles north of Ellsworth

2	WATER WELL OWNER: Don Soukup	RR#, St. Address, Box # 139 W. 15th	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code Ellsworth, KS 67439		Application Number:



4	DEPTH OF WELL	90.5	ft
	WELL'S STATIC WATER LEVEL	76	ft.
	WELL WAS USED AS:		
	1 Domestic	5 Public Water Supply	9 Dewatering
	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well
	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well
	4 Industrial	8 Air Conditioning	12 Other <u>Stock Well</u>
	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 <input checked="" type="checkbox"/> No _____		

5	TYPE OF BLANK CASING USED:	
	1 Steel	3 RMP (SR)
	2 PVC	4 ABS
	5 Wrought	6 Asbestos-Cement
	7 Fiberglass	8 Concrete Tile
	9 Other (Specify below)	<u>Galvanized Tin</u>
	Blank casing diameter <u>4" & 5"</u> in.	Was casing pulled? Yes _____ No <input checked="" type="checkbox"/>
	Casing height above or <u>below</u> land surface <u>48</u> in.	If yes, how much _____

6	GROUT PLUG MATERIAL:	1 Neat Cement	2 Cement grout	3 Bentonite	4 Other <u>Bentonite Holeplug</u>
	Grout Plug Intervals:	From _____ ft. to _____ ft.,	From _____ ft. to _____ ft.	From <u>90.5</u> ft. to <u>4</u> ft.	
	What is the nearest source of possible contamination:				
	1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	
	2 Sewer lines	7 Pit privy	12 Fertilizer storage		
	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	<u>None known</u>	
	4 Lateral lines	9 Feedyard	14 Abandoned water well		
	5 Cess Pool	10 Livestock pens	15 Oil well/Gas well		
	Direction from well?	How many feet?			

FROM	TO	PLUGGING MATERIALS
90.5	4	Bentonite Holeplug
4	0	Compacted Soil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>8-18-05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/year) <u>8-19-05</u> under the business name of <u>Clarke Well & Equipment, Inc.</u>
	by (signature) <i>[Signature]</i>

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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.