

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Ellsworth	SW ¹⁴ NW ¹⁴ NE ¹⁴	25	15	8 EW

Distance and direction from nearest town or city street address of well if located within city?
 Former Salt Mine, Kanopolis, KS

2	WATER WELL OWNER:	Kansas Department of Health and Environment	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #	1000 SW Jackson, Ste. 410	Application Number:
	City, State, ZIP Code	Topeka, KS 66612	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 30.01 ft.
			WELL'S STATIC WATER LEVEL 27.91 ft.
			WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 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"/> X if yes, mo/day/yr sample was submitted
			Water Well Disinfected: Yes No <input checked="" type="checkbox"/> 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>2</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> X No If yes, how much <u>30.01</u> Casing height above or below land surface in.

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
	Grout Plug Intervals:	From <u>30.01</u> ft.	to <u>0</u> ft.	From ft.	to ft., 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)	
	Direction from well? <u>999</u>		How many feet? <u>999</u>		

FROM	TO	PLUGGING MATERIALS
30.01	0	3/8 Bentonite chips
		MWS-2

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>8-2-06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>665</u> This Water Well Record was completed on (mo/day/year) <u>8-24-06</u>
	by (signature) <i>Steven E. Pratt</i> under the business name of <u>Pratt Well Environmental</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, 1 000 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.