

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Ellsworth		NW 1/4 NW 1/4 NE 1/4	28	16 S	6 E/W

Distance and direction from nearest town or city street address of well if located within city?
113 Venango Lane, Kanopolis

2	WATER WELL OWNER: Fred and Sue Guzek	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #: PO Box 233		Application Number:
City, State, ZIP Code : Dover KS 66420		

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 33 ft. WELL'S STATIC WATER LEVEL 12.5 ft. WELL WAS USED AS: <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>● Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	● Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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Was a chemical / bacteriological sample submitted to Department? Yes No✓.....
If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes✓..... No

5	TYPE OF BLANK CASING USED:										
<table border="0"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td>● PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>		1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	● PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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Blank casing diameter 5 in. Was casing pulled? Yes No✓..... If yes, how much											
Casing height above or below land surface N/A in.											

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ● Bentonite 4 Other																				
Grout Plug Intervals: From 0 ft. to 12.46 ft., From ft. to ft., From to ft.																					
What is the nearest source of possible contamination:																					
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Direction from well? How many feet?																					

FROM	TO	PLUGGING MATERIALS
0	12.46	Bentonite
12.46	33	Chlorinated Sand

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/30/2008 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) 2/7/2008 under the business name of GeoCore, Inc. by (signature) <i>[Signature]</i>
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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, 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.