

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Ellsworth	NE ¼ NW ¼ NW ¼	19	17	9 EW

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

N/A

2	WATER WELL OWNER: David Wessler		
	RR #, St. Address, Box #: P.O. Box 19	Board of Agriculture, Division of Water Resources	
	City, State, ZIP Code: Lorraine, KS 67459	Application Number:	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 58 ft. WELL'S STATIC WATER LEVEL 39 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
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N

X		
NW		NE
SW		SE

 S

WE

Was a chemical / bacteriological sample submitted to Department? Yes No **X**
 If yes, mo/day/yr sample was submitted
 Water Well Disinfected: Yes **X** No

5	TYPE OF BLANK CASING USED:		
	1 Steel 3 RMP (SR) 5 Wrought 2 PVC 4 ABS 6 Asbestos-Cement	7 Fiberglass 8 Concrete Tile	☒ 9 Other (Specify below) Sandstone Rock
	Blank casing diameter 48 in. Was casing pulled? Yes No X Casing height above or below land surface 60 in. If yes, how much below		

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ☒ 3 Bentonite 4 Other Grout Plug Intervals: From 5 ft. to 4.5 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? Southeast How many feet? 20		

FROM	TO	PLUGGING MATERIALS
58	35	Chlorinated Sand
35	5	Subsoil Clays
5	4.5	Bentonite
4.5	0	Topsoil

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-15-2005 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) 8-10-2005 under the business name of Ellsworth County NPS Coordinator by (signature) <i>Brad Krutz</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.