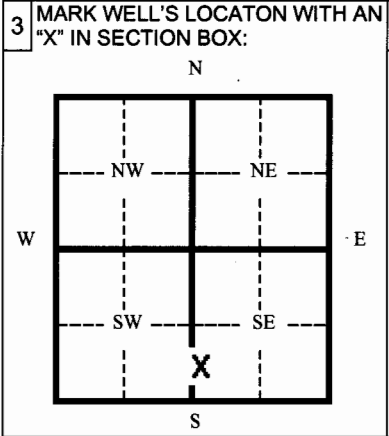


1	LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
County:	Ness NW 1/4 SW 1/4 SE 1/4	30	18	23-West

Distance and direction from nearest town or city street address of well if located within city?
Near northeast corner of Court and Sycamore Street, Ness City

2	WATER WELL OWNER: Harold Gable	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # 301 W. Sycamore Street		
City, State, ZIP Code : Ness City, Kansas 67560		



4	DEPTH OF WELL	51.5	ft.
	WELL'S STATIC WATER LEVEL	46.49	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 Lawn and Garden (domestic)	11 Injection Well	
4 Industrial	8 Air Conditioning	12 Other	
Was a chemical/bacteriological sample submitted to Department?			Yes ___ No X
If yes, mo/day/yr sample was submitted			_____
Water Well Disinfected:			Yes ___ No X

5	TYPE OF BLANK CASING USED:			
1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
Blank casing diameter 2.375 in.		Was casing pulled? Yes X No ___		If yes, how much? 51.5'
Casing height above or below land surface Above/Unknown in.		Existing grout seal equal to or greater than 20' .		

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soils			
Grout Plug Intervals From 51.5 ft. to 3.0 ft. From 3.0 ft. to 0.0 ft. From ___ ft. to ___ 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		
4 Lateral lines	9 Feedyard	14 Abandoned water well		
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well		

Direction from well? **Southwest** How many feet? **200**

FROM	TO	CODE	PLUGGING MATERIALS
0.0	3.0		Compacted soils
3.0	51.5		Bentonite chips

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 10/20/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 11/20/05 under the business name of Quad State Services, Inc. by (signature) <i>[Signature]</i>	
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.