

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Ness</b>	<b>SW 1/4 SW 1/4 SE 1/4</b>	<b>31</b>	<b>T 18 S</b>	<b>R 23 E</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">W</span>

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

Approximately 1/2 mile south of Ness City

2 WATER WELL OWNER:	City of Ness City	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #	P.O. Box 419	Application Number:
City, State, ZIP Code	Ness City, KS 67560	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>462</u> ft												
	WELL'S STATIC WATER LEVEL <u>Not checked</u> ft.												
	WELL WAS USED AS:												
	<table style="width:100%;"> <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><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10 Monitoring Well</span></td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; 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	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10 Monitoring Well</span>	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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4 Industrial	8 Air Conditioning	12 Other											
	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:	<table style="width:100%;"> <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><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2 PVC</span></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)	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2 PVC</span>	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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Blank casing diameter	<u>4 1/2</u> in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/> If yes, how much _____										
Casing height	above or <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">below</span> land surface <u>48</u> in.										

6 GROUT PLUG MATERIAL:	<table style="width:100%;"> <tr> <td>1 Neat Cement</td> <td>2 Cement grout</td> <td>3 Bentonite</td> <td><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">4 Other</span> <u>Bentonite Holeplug</u></td> </tr> </table>	1 Neat Cement	2 Cement grout	3 Bentonite	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">4 Other</span> <u>Bentonite Holeplug</u>																
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Grout Plug Intervals:	From _____ ft. to _____ ft., From _____ ft. to _____ ft. From <u>24</u> ft. to <u>4</u> ft.																				
What is the nearest source of possible contamination:																					
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Direction from well?	How many feet?																				

FROM	TO	PLUGGING MATERIALS
462	24	Chlorinated Sand
24	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>05-18-07</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>05-22-07</u> under the business name of <u>Clarke Well &amp; Equipment, Inc.</u> by (signature)
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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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.