

1	LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
County:	Ness SE 1/4 NW 1/4 NE 1/4	31	18	23-West

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

520 S. Pennsylvania, Ness City, Kansas

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

3	MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 40 ft.									
		WELL'S STATIC WATER LEVEL 31.48 ft.										
		WELL WAS USED AS:										
		<table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>8 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><input checked="" type="radio"/> 9 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</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	8 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 9 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial
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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 ___ No <input checked="" type="checkbox"/>												

5	TYPE OF BLANK CASING USED:			
1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
<input checked="" type="radio"/> 2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	
Blank casing diameter 2.375 in.		Was casing pulled? Yes ___ No <input checked="" type="checkbox"/>		If yes, how much? N/A
Casing height above or below land surface Unknown in.		Casing plugged; casing removed to depth of 3' BTOC.		

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="radio"/> 3 Bentonite	<input checked="" type="radio"/> 4 Other	Soils
Grout Plug Intervals From 40.0 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	<input checked="" type="radio"/> 11 Fuel storage (former)	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? **West-northwest** How many feet? **115**

FROM	TO	CODE	PLUGGING MATERIALS
0.0	3.0		Soils
3.0	40.0		Bentonite chips

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 05/24/07 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) 05/25/07 under the business name of Quad State Services, Inc.
by (signature)	

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.