

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: Barton	SW 1/4 NW 1/4 NW 1/4	28		19		13	<u>EW</u>

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

21st St. and Washington, Great Bend, KS

2	WATER WELL OWNER: Hank Rubbel	RR #, St. Address, Box # 2100 Washington	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code Great Bend, KS 67530	Application Number:	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 15.29 ft.
			WELL'S STATIC WATER LEVEL 8.96 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 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other
			Was a chemical / bacteriological sample submitted to Department? Yes _____ No <u>X</u> if yes, mo/day/yr sample was submitted _____
			Water Well Disinfected: Yes _____ No <u>X</u>

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

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<u>3 Bentonite</u>	4 Other
	Grout Plug Intervals:	From <u>8.4</u> ft.	to <u>1</u> ft.	From _____ ft.	to _____ ft.
	What is the nearest source of possible contamination:				
	1 Septic tank 6 Seepage pit 11 Fuel storage 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				<u>16 Other (specify below)</u> <u>CST</u>
	Direction from well? <u>On location</u>	How many feet? <u>999</u>			

FROM	TO	PLUGGING MATERIALS
15.29	8.4	Natural Material
8.4	1	3/8 Bentonite chips
1	0	Cement
		MW-7

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>3-4-07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>665</u> This Water Well Record was completed on (mo/day/year) <u>3-19-07</u> under the business name of <u>Bratt Well Environmental</u>
	by (signature) <u>Steven E. Gell</u>

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, 1 000 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.