

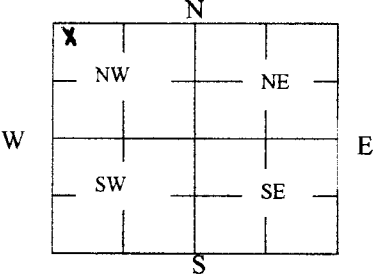
1 LOCATION OF WATER WELL: Fraction 1/4 NW 1/4 NW 1/4 NW 1/4 Section Number 30 Township Number T 19 S Range Number 17 E W
 County: Rush

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 6 South, 2 3/4 East of Rush Center

Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Datum: WGS84, NAD83, NAD27
 Collection Method:
 GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: Brian Ross
 RR#, St. Address, Box #: 2816 Avenue W
 City, State ZIP Code: Rush Center, KS 67575

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL 185 **ft.**
 WELL'S STATIC WATER LEVEL 170 **ft.**
 WELL WAS USED AS:
 Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other _____
 Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Wrought Fiberglass Other (Specify below) _____
 PVC ABS Asbestos-Cement Concrete Tile
 Blank casing diameter 2 1/2 in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Plug Intervals: From _____ ft. to _____ ft., From 25 ft. to 3 ft., From _____ to _____ ft.
 What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel Storage Other (specify below) _____
 Sewer lines Pit privy Fertilizer storage House
 Watertight sewer lines Sewage lagoon Insecticide storage _____
 Lateral lines Feedyard Abandoned water well _____
 Cess pool Livestock pens Oil well/Gas well _____
 Direction from well? North
 How many feet? 60ft

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
185	25	Chlorinated gravel			
25	3	Hole plug			
3	0	Top soil			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-15-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134. This Water Well Record was completed on (mo/day/year) 2-2-16 under the business name of Rosencrantz- Bemis Ent Inc by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.