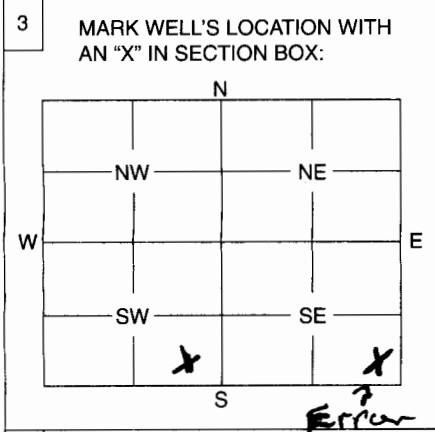


1 LOCATION OF WATER WELL: Fraction SE 1/4 of SE 1/4 SW 1/4 Section Number 23 Township Number 19 Range Number 19
 County: Rush Co E/W

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

2 WATER WELL OWNER: Glendoris Blattner
 RR #, St. Address, Box #: 304 Elmone Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Rozel KS 67574 Application Number:



4 DEPTH OF WELL 210 ft.
 WELL'S STATIC WATER LEVEL 175 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
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much

Casing height above or below land surface 10 Ft. below in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 170 ft. to 150 ft., From 25 ft. to 8 ft., From 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

Direction from well? 1 mi How many feet?

FROM	TO	PLUGGING MATERIALS
210	190	Sand
170	150	Bentonite
150	25	Bentonite
25	8	Bentonite
8	0	Back Fill dirt

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/8/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) under the business name of

* by (signature) Glendoris Blattner

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, 1000 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.