

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number																								
	County: <b>Brown</b>	<b>NW 1/4 SW 1/4 SE 1/4</b>		<b>33</b>		<b>1</b>		<b>16</b> E/W																								
Distance and direction from nearest town or city street address of well if located within city? <b>316 First St, Hamlin</b>																																
2	WATER WELL OWNER: <b>Rosemary Ward</b>																															
RR #, St. Address, Box #:			Board of Agriculture, Division of Water Resources																													
City, State, ZIP Code: <b>Hiawatha, KS. 66434</b>			Application Number:																													
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4	DEPTH OF WELL ..... <b>14</b> ..... ft.																												
<div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>33</b> </div> <table border="1" style="width: 100%; height: 150px; border-collapse: collapse;"> <tr><td colspan="2" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">W</td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td></tr> <tr><td colspan="2" style="text-align: center;">S</td></tr> </table>			N		NW	NE	W	E	SW	SE	S		WELL'S STATIC WATER LEVEL ..... <b>6</b> ..... ft.																			
			N																													
			NW	NE																												
			W	E																												
SW	SE																															
S																																
WELL WAS USED AS:																																
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input checked="" type="checkbox"/> 1 Domestic  <input type="checkbox"/> 2 Irrigation  <input type="checkbox"/> 3 Feedlot  <input type="checkbox"/> 4 Industrial </div> <div style="width: 33%;"> <input type="checkbox"/> 5 Public Water Supply  <input type="checkbox"/> 6 Oil Field Water Supply  <input type="checkbox"/> 7 Domestic (Lawn &amp; Garden)  <input type="checkbox"/> 8 Air Conditioning </div> <div style="width: 33%;"> <input type="checkbox"/> 9 Dewatering  <input type="checkbox"/> 10 Monitoring Well  <input type="checkbox"/> 11 Injection Well  <input type="checkbox"/> 12 Other ..... </div> </div>																																
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:																															
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 25%;">1 Steel</div> <div style="width: 25%;">3 RMP (SR)</div> <div style="width: 25%;">5 Wrought</div> <div style="width: 25%;">7 Fiberglass</div> <div style="width: 25%;">9 Other (Specify below) <b>Hand dug</b></div> <div style="width: 25%;">2 PVC</div> <div style="width: 25%;">4 ABS</div> <div style="width: 25%;">6 Asbestos-Cement</div> <div style="width: 25%;">8 Concrete Tile</div> </div>																																
Blank casing diameter ..... in. Was casing pulled? Yes ..... No ..... If yes, how much ..... Casing height above or below land surface ..... in.																																
6	GROUT PLUG MATERIAL:      1 Neat cement      2 Cement grout <input checked="" type="radio"/> 3 Bentonite      4 Other .....																															
Grout Plug Intervals:      From ..... ft.      to ..... ft.,      From <b>5.5</b> ft.      to <b>4.5</b> ft.,      From ..... to ..... ft.																																
What is the nearest source of possible contamination:																																
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="checkbox"/> 1 Septic tank  <input type="checkbox"/> 2 Sewer lines  <input type="checkbox"/> 3 Watertight sewer lines  <input type="checkbox"/> 4 Lateral lines  <input type="checkbox"/> 5 Cess pool </div> <div style="width: 33%;"> <input type="checkbox"/> 6 Seepage pit  <input type="checkbox"/> 7 Pit privy  <input type="checkbox"/> 8 Sewage lagoon  <input type="checkbox"/> 9 Feedyard  <input type="checkbox"/> 10 Livestock pens </div> <div style="width: 33%;"> <input type="checkbox"/> 11 Fuel storage  <input type="checkbox"/> 12 Fertilizer storage  <input type="checkbox"/> 13 Insecticide storage  <input type="checkbox"/> 14 Abandoned water well  <input type="checkbox"/> 15 Oil well/Gas well </div> <div style="width: 33%;"> <input type="checkbox"/> 16 Other (specify below) ..... </div> </div>																																
Direction from well? ..... How many feet? .....																																
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7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>7-19-06</b> 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 <b>Rosemary Ward by Paul Kopp, NPS Co. for Br. Co. Co. 5-10-08</b> by (signature) <b>Rosemary Ward</b>																															
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.																																