

1	LOCATION OF WATER WELL: County: McPherson	Fraction SE 1/4 NE 1/4 NE 1/4	Section Number 21	Township Number T-20-S	Range Number R-2 EW																								
Distance and direction from nearest town or city street address of well if located within city? 5 1/4 S of Galva, KS 875 21st Ave																													
2	WATER WELL OWNER: Robert J Schrag RR #, St. Address, Box #: 875 21st AVE City, State, ZIP Code: GALVA, KS 67443		Board of Agriculture, Division of Water Resources Application Number:																										
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>		4	DEPTH OF WELL 35 ft. WELL'S STATIC WATER LEVEL 25 ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other </div> </div>																									
Was a chemical / bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was submitted																													
Water Well Disinfected: Yes X No																													
5	TYPE OF BLANK CASING USED: <div style="display: flex; justify-content: space-between;"> <div> 1 Steel 2 PVC </div> <div> 3 RMP (SR) 4 ABS </div> <div> 5 Wrought 6 Asbestos-Cement </div> <div> 7 Fiberglass 8 Concrete Tile </div> <div> 9 Other (Specify below) </div> </div> Blank casing diameter 6 in. Was casing pulled? Yes X No X If yes, how much 4" Casing height above or below land surface 4 in. CASING WAS REMOVED BELOW GROUND LEVEL																												
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From 4 ft. to 3 ft., From 3 ft. to 0 ft., From to ft. What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> 16 Other (specify below) </div> </div> Direction from well? NW How many feet? 7																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:15%;">TO</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>35'</td> <td>4'</td> <td>Coarse GRAVEL</td> </tr> <tr> <td>4'</td> <td>3'</td> <td>BENTONITE</td> </tr> <tr> <td>3'</td> <td>0'</td> <td>Concrete</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <div style="margin-top: 20px;"> <p>Well was located within basement floor of home approx 5' below grade. Figures reflect depth to basement floor</p> </div>						FROM	TO	PLUGGING MATERIALS	35'	4'	Coarse GRAVEL	4'	3'	BENTONITE	3'	0'	Concrete												
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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) 4/8/2006 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. N/A This Water Well Record was completed on (mo/day/year) 4/12/2006 under the business name of N/A by (signature) Robert J Schrag																												
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.																													