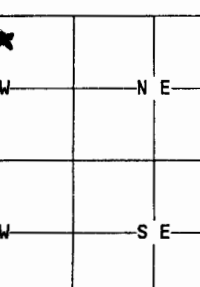


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number															
County: MCPHERSON	NE 1/4 NW 1/4 NW 1/4	12	20	3W															
Distance and direction from nearest town or city street address of well if located within city? 2 1/2 miles south and 1 3/4 miles west of corner of 56 and 153 Highways																			
2 WATER WELL OWNER: James Metheny																			
RR#, St. Address, Box #: R.R.#2 Box 39		Board of Agriculture, Division of Water Resources Application Number: NONE																	
City, State, ZIP Code: MCPHERSON, Kansas 67460																			
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align:center;">N</div>  <div style="text-align:center;">S</div>		4 DEPTH OF WELL..... 62.6"ft. WELL'S WATER LEVEL..... 22'ft. WELL WAS USED AS: <input checked="" type="checkbox"/> 1 Domestic 5 Public Water Supply 9 Dewatering <input type="checkbox"/> 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well <input type="checkbox"/> 3 Feedlot 7 Lawn and Garden Only 11 Injection Well <input type="checkbox"/> 4 Industrial 8 Air Conditioning 12 Other..... Was a chemical/bacteriological sample submitted to Department? Yes....No.. X . If yes, mo/day/yr sample was submitted..... Water Well Disinfected: Yes..... No.. X ...																	
5 TYPE OF BLANK CASING USED: <input checked="" type="radio"/> 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) <input type="radio"/> 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter..... 2in. Was casing pulled? Yes..... No.. X .. If yes, how much..... Casing height above or <u>below</u> land surface..... 7'in.																			
6 GROUT PLUG MATERIAL: 1 Neat cement <input checked="" type="radio"/> 2 Cement grout 3 Bentonite 4 Other..... Grout Plug Intervals: From 62.6" ft. to 6ft., From.....ft. toft., 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, 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard <input checked="" type="radio"/> 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well Direction from well? How many feet?																			
<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>62.6"</td> <td>7'0"</td> <td>Cement Grout</td> </tr> <tr> <td>7'0"</td> <td>6'0"</td> <td>APPROX 1/4 YARD</td> </tr> <tr> <td>6'0"</td> <td>0</td> <td>Pit</td> </tr> <tr> <td></td> <td></td> <td>CASING CUT OFF at 7' Below Ground level</td> </tr> </tbody> </table> <div style="margin-top: 10px; font-family: cursive; font-size: 1.2em;"> Dug Down 1' FROM Bottom of Pit AND filled full of Cement Grout </div>					FROM	TO	PLUGGING MATERIALS	62.6"	7'0"	Cement Grout	7'0"	6'0"	APPROX 1/4 YARD	6'0"	0	Pit			CASING CUT OFF at 7' Below Ground level
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-15-94 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) 7-18-94 under the business name of Board of Public Utilities by (signature) Frank A. Radgortz																			
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send two copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.																			