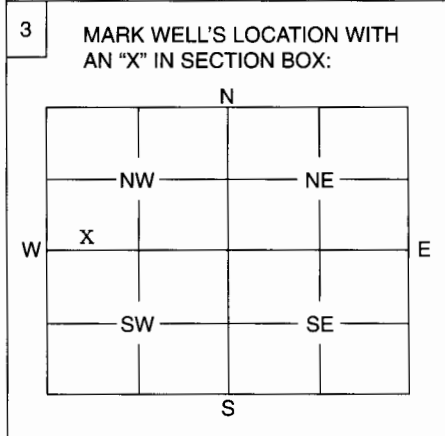


| | | | | | |
|---|-------------------------|---|-------------------------|---------------------------|--------------------------------------|
| 1 | LOCATION OF WATER WELL: | Fraction C/S SW ¹ / ₄ NW ¹ / ₄ | Section Number 7 | Township Number 21 | Range Number 13 EW |
|---|-------------------------|---|-------------------------|---------------------------|--------------------------------------|

County: Stafford
 Distance and direction from nearest town or city street address of well if located within city?
4north of Seward

| | | |
|---|--|---|
| 2 | WATER WELL OWNER: <u>Russell Oil</u> P.O. Box 1469 RR #, St. Address, Box #: <u>Plainfield, Il. 60544</u> City, State, ZIP Code : | <u>SFWW3404</u> Board of Agriculture, Division of Water Resources Application Number: <u>20060487</u> |
|---|--|---|



4 DEPTH OF WELL75..... ft.
 WELL'S STATIC WATER LEVEL27..... 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 X.....
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes HTH.. No

5 TYPE OF BLANK CASING USED:

| | | | | |
|--------------|------------|-------------------|-----------------|-------------------------|
| 1 Steel | 3 RMP (SR) | 5 Wrought | 7 Fiberglass | 9 Other (Specify below) |
| 2 <u>PVC</u> | 4 ABS | 6 Asbestos-Cement | 8 Concrete Tile | |

Blank casing diameter5..... in. Was casing pulled? Yes No X..... If yes, how much

Casing height above or below land surface36..... in.

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

Grout Plug Intervals: From 3..... ft. to 0..... ft., From ft. to ft., From 75..... to 3..... 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 | <u>None</u> |
| 3 Watertight sewer lines | 8 Sewage lagoon | 13 Insecticide storage | |
| 4 Lateral lines | 9 Feedyard | 14 Abandoned water well | |
| 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | |

Direction from well? How many feet?

| FROM | TO | PLUGGING MATERIALS |
|------|----|--------------------|
| 75 | 3 | <u>Hole plug</u> |
| 3 | 0 | <u>Cement</u> |
| | | |
| | | |
| | | |
| | | |

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)01-19-07..... 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)01-22-07..... under the business name of Rosencrantz- Bemis by (signature) Gara Abery

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.