

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Pawnee</u>	<u>SE 1/4 SE 1/4 SE 1/4</u>	<u>28</u>	<u>21</u>	<u>19 N</u>

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

2 WATER WELL OWNER:	<u>Don Shank</u>	<u>"The Store" Rozel KS</u>
RR#, St. Address, Box #	<u>PO Box 27</u>	Board of Agriculture, Division of Water Resources
City, State, ZIP Code	<u>Burdett, KS 67523</u>	Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL 59.1 ft.

WELL'S STATIC WATER LEVEL \_\_\_\_\_ ft.

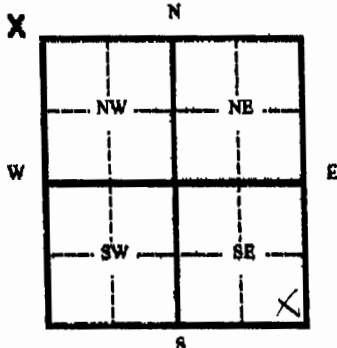
WELL WAS USED AS:

- |              |                              |                           |
|--------------|------------------------------|---------------------------|
| 1 Domestic   | 5 Public Water Supply        | 9 Dewatering              |
| 2 Irrigation | 6 Oil Field Water Supply     | <u>10 Monitoring Well</u> |
| 3 Feedlot    | 7 Lawn and Garden (domestic) | 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) |
| <u>2 PVC</u> | 4 ABC      | 6 Asbestos-Cement | 8 Concrete Tile |                         |

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	<u>3 Bentonite</u>	4 Other _____
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Grout Plug Intervals From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. 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   | <u>U.S.T. Site</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	CODE	PLUGGING MATERIALS
<u>0</u>	<u>3</u>		<u>Native pack</u>
<u>3</u>	<u>59.1</u>		<u>Bentonite</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>8/27/06 - 8/29/06</u> 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/yr) _____ under the business name of <u>Bluestem Environmental Engineering</u> by (signature) <u>Mike H.</u>
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.