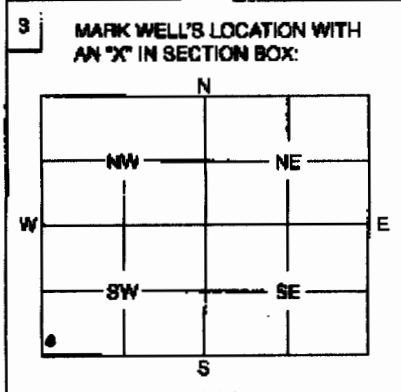


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>Hodgeman</u>	<u>SW 1/4 SW 1/4 SW 1/4</u>	<u>34</u>	<u>21</u>	<u>21</u> E/W

Distance and direction from nearest town or city street address of well if located within city:
5.1 miles SW of Burdett, KS

2	WATER WELL OWNER: <u>Cure INC</u>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <u>501 South Broadway</u>	Application Number: <u>H6 11</u>
	City, State, ZIP Code: <u>Hanston, KS 67849</u>	



4 DEPTH OF WELL 100 ft. Redrilled well

WELL'S STATIC WATER LEVEL 50 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 X No _____

50' North
5230' West

5 TYPE OF BLANK CASING USED:

<input checked="" type="checkbox"/> Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
<input checked="" type="checkbox"/> PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter 16 in. Was casing pulled? Yes _____ No X If yes, how much _____

Casing height above or below land surface 3'

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other _____

Grout Plug Intervals: From 3 ft. to 7 ft., From _____ ft. to _____ ft., 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	<u>[In-f-a-s-a-d-o-n-b-e-l-l]</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? North How many feet? 60'

FROM	TO	PLUGGING MATERIALS
<u>100</u>	<u>48</u>	<u>Sand and Gravel</u>
<u>48</u>	<u>7</u>	<u>Clays</u>
<u>7</u>	<u>3</u>	<u>Bentonite</u>
<u>3</u>	<u>0</u>	<u>Topsoil</u>

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/13/2009 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 _____ by (signature) Dale J. Cure

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.