

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: Pawnee	SE 1/4 SE 1/4 SW 1/4	12		T 23	S	R 15	E <u>W</u>

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

Approximately 9 miles east and 8 miles south of Larned

2	WATER WELL OWNER:	Dean Anthony
	RR#, St. Address, Box #	401 Rochester - Apt. 111
	City, State, ZIP Code	Pratt, KS 67124
	Board of Agriculture, Division of Water Resources	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL	48.8	ft
			WELL'S STATIC WATER LEVEL	27.7	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 <input checked="" type="checkbox"/>		
			If yes, mo/day/yr sample was submitted _____		
			Water Well Disinfected: Yes <input checked="" type="checkbox"/> No _____		

5	TYPE OF BLANK CASING USED:
	<input checked="" type="radio"/> 1 Steel <input type="radio"/> 3 RMP (SR) <input type="radio"/> 5 Wrought <input type="radio"/> 7 Fiberglass <input type="radio"/> 9 Other (Specify below) <input type="radio"/> 2 PVC <input type="radio"/> 4 ABS <input type="radio"/> 6 Asbestos-Cement <input type="radio"/> 8 Concrete Tile
	Blank casing diameter 16 in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/> If yes, how much _____
	Casing height above or <input checked="" type="radio"/> below land surface 51.6 in.

6	GROUT PLUG MATERIAL:	1 Neat Cement	<input checked="" type="radio"/> 2 Cement grout	<input checked="" type="radio"/> 3 Bentonite	4 Other
	GROUT PLUG INTERVALS:	From 26 ft. to 4 ft.,	From 27 ft. to 26 ft.	From _____ ft. to _____ ft.	
	What is the nearest source of possible contamination:				
	1 Septic tank	6 Seepage pit	11 Fuel storage	<input checked="" type="radio"/> 16 Other (specify below)	
	2 Sewer lines	7 Pit privy	12 Fertilizer storage		
	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	None known	
	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
48	27	Chlorinated Sand
27	26	Bentonite Holeplug
26	4	Cement Grout
4	0	Compacted Soil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 01-20-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 01-27-09 under the business name of Clarke Well & Equipment, Inc.
	by (signature)

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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.