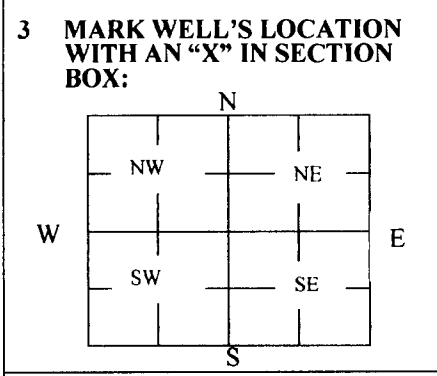


1 LOCATION OF WATER WELL: County: <u>Reno</u>	Fraction SE $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number <u>20</u>	Township Number T <u>22</u> S	Range Number 5 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
---------------------------------------------------------	---------------------------------------------------------------------------------	-----------------------------	----------------------------------	------------------------------------------------------------------------------------

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here

Global Positioning Systems (GPS) information:
 Latitude: 38.11615 (in decimal degrees)
 Longitude: 097.90142 (in decimal degrees)
 Elevation: 1659
 Datum: WGS84, NAD83, NAD27
 Collection Method:
 GPS unit (Make/Model: Garmin 62S)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

2 WATER WELL OWNER: Don Miller
 RR#, St. Address, Box #: 1600 E. 56th Avenue
 City, State ZIP Code: Hutchinson, Kansas 67502



4 DEPTH OF WELL 47 ft.
 WELL'S STATIC WATER LEVEL 43 ft.
 WELL WAS USED AS:
 Domestic Irrigation Feedlot Industrial
 Public Water Supply Oil Field Water Supply Air Conditioning
 Domestic (Lawn & Garden)
 Dewatering Monitoring Injection Well Other _____
 Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much _____
 Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Sand

Grout Plug Intervals: From 47 ft. to 30 ft., From 30 ft. to 0 ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel Storage	<input checked="" type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<u>new water well</u>
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? <u>NE</u>
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? <u>40'</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
47	30	Sand			
30	0	Holeplug			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/23/2015 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) 7/27/2015 under the business name of Rosencrantz-Bemis Ent. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint 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: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

Check one: White Copy Blue Copy Pink Copy