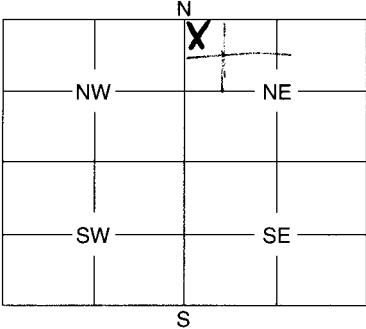


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																				
	County: <u>Harvey</u>	<u>NW 1/4 NW 1/4 NE 1/4</u>	<u>2</u>	<u>23 S</u>	<u>2 W</u> E/W																				
Distance and direction from nearest town or city street address of well if located within city? <u>221 W. 6th St., Halstead</u>																									
2	WATER WELL OWNER: <u>Halstead Middle School</u>																								
	RR #, St. Address, Box #: <u>221 W. 6th St.</u>		Board of Agriculture, Division of Water Resources																						
	City, State, ZIP Code: <u>Halstead, KS</u>		Application Number: _____																						
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  <div style="text-align: center;">  </div>		4 DEPTH OF WELL <u>65</u> ft.																						
			WELL'S STATIC WATER LEVEL <u>26</u> ft.																						
WELL WAS USED AS:																									
<table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 <u>Domestic (Lawn &amp; Garden)</u></td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>						1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 <u>Domestic (Lawn &amp; Garden)</u>	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other								
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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:																								
	<table style="width:100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td>2 <u>PVC</u></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>					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											
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2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	8 Concrete Tile																						
	Blank casing diameter <u>6</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No _____ If yes, how much <u>Top 4'</u>																								
	Casing height above or below land surface _____ in.																								
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____																								
	Grout Plug Intervals: From <u>4</u> ft. to <u>65</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.																								
What is the nearest source of possible contamination:																									
<table style="width:100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 <u>Watertight sewer lines</u></td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table>						1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage		3 <u>Watertight sewer lines</u>	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	
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Direction from well? <u>N</u> How many feet? <u>100'</u>																									
FROM TO PLUGGING MATERIALS			<u>well was cut off 4' below surface - plugged with bentonite.</u> <u>Cement grout was found 3' below surface.</u>																						
<u>4 65 Bentonite</u>																									
7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>2-21-05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>611</u> This Water Well Record was completed on (mo/day/year) _____ under the business name of <u>Chase Drilling</u> by (signature) <u>O Chase</u>																								

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.