

|                                   |                            |                      |                             |                         |
|-----------------------------------|----------------------------|----------------------|-----------------------------|-------------------------|
| LOCATION OF WATER WELL:<br>HARVEY | Fraction<br>NW ¼ NW ½ NW ¼ | Section Number<br>10 | Township Number<br>23 SOUTH | Range Number<br>03 WEST |
|-----------------------------------|----------------------------|----------------------|-----------------------------|-------------------------|

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

APPROXIMATELY 1 MILE EAST AND 3 MILES NORTH OF BURRTON, KS

## WATER WELL OWNER:

RR#, St. Address, Box #: EQUUS BEDS GROUNDWATER MANAGEMENT  
DISTRICT NO. 2  
313 SPRUCE STREET  
City, State, ZIP Code: HALSTEAD, KS 67056

Board of Agriculture, Division of Water Resources  
Application Number:

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

|   |  |
|---|--|
| N |  |
| X |  |
|   |  |
| S |  |

DEPTH OF WELL 103 ft.

WELL'S STATIC WATER LEVEL 57.95 ft.

WELL WAS USED AS:

- |              |                          |                                   |
|--------------|--------------------------|-----------------------------------|
| 1 Domestic   | 5 Public Water Supply    | 9 Dewatering                      |
| 2 Irrigation | 6 Oil Field Water Supply | <b>10 Monitoring Well - EB22B</b> |
| 3 Feedlot    | 7 Lawn and Garden Only   | 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: / /

WaterWell Disinfected: Yes ☒ No ☐

## TYPE OF BLANK CASING USED:

- |              |            |                   |                 |         |
|--------------|------------|-------------------|-----------------|---------|
| 1 Steel      | 3 RMP (SR) | 5 Wrought         | 7 Fiberglass    | 9 Other |
| <b>2 PVC</b> | 4 ABS      | 6 Asbestos-Cement | 8 Concrete Tile |         |

Blank casing diameter 2.0 in.

Was casing pulled? Yes ☐ No ☒ if yes, how much 0.0 ft bls

Casing height above or below land surface 3 feet.

GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other

Grout Plug Intervals: From 103 ft. to 3 ft.

What is the nearest source of possible contamination:

- |                          |                   |                         |                                     |
|--------------------------|-------------------|-------------------------|-------------------------------------|
| 1 Septic tank            | 6 Seepage pit     | 11 Fuel Storage         | <b>16 Other - grazing livestock</b> |
| 2 Sewer lines            | 7 Pit privy       | 12 Fertilizer storage   |                                     |
| 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?

West

How many feet? approximately 50 ft.

| FROM | TO | PLUGGING MATERIALS  |
|------|----|---------------------|
| 103  | 3  | Bentonite, HolePlug |
| 3    | 0  | Topsoil             |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11 / 30 / 2009 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. NA under the business name of Equus Beds GMD2

by (signature) *Tim Boere, GMD2* 12-22-09

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, and underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.