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|---------------------------|-----------------------------|----------------|-----------------|---------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: <u>Ham. Hon</u> | <u>NE 1/4 SW 1/4 SE 1/4</u> | <u>26</u> | <u>23</u> | <u>42</u> E/W |

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

2 WATER WELL OWNER: Carter Farm INC
 RR #, St. Address, Box #: PO Box 625 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Syracuse, KS 67878 Application Number:

| | |
|--|--|
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 DEPTH OF WELL <u>74</u> ft. |
| | WELL'S STATIC WATER LEVEL <u>28</u> 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 <u>X</u> If yes, mo/day/yr sample was submitted | |
| Water Well Disinfected: Yes <u>X</u> No | |

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter 1.8 in. Was casing pulled? Yes No X If yes, how much

Casing height above or below land surface 36 in.

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

Grout Plug Intervals: From ft. to 6-4 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 | |
| 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? 300

| FROM | TO | PLUGGING MATERIALS |
|-----------|-----------|----------------------|
| <u>74</u> | <u>26</u> | <u>Washed Gravel</u> |
| <u>26</u> | <u>6</u> | <u>Clay Dirt</u> |
| <u>6</u> | <u>4</u> | <u>Concrete</u> |
| | | |
| | | |
| | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3-2-2008 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) D. Schmidt

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.