

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Reno	NW 1/4 NW 1/4 SE 1/4	15	24	10 E/W

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

118 N. Main St., Sylvia

2	WATER WELL OWNER: Citizens Bank of Kansas Attn: Tom Baxa RR #, St. Address, Box #: 300 N. Main St. City, State, ZIP Code : Kingman, KS 67068	Board of Agriculture, Division of Water Resources Application Number:
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 10 ft. WELL'S STATIC WATER LEVEL Dry ft. WELL WAS USED AS: <table border="0"> <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 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other Vapor extraction well</td> </tr> </table>	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 Vapor extraction well
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Was a chemical / bacteriological sample submitted to Department? Yes No ☒

If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No ☒

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

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other *
Grout Plug Intervals: From ft. to 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? How many feet?					

FROM	TO	PLUGGING MATERIALS

VEW1

KDHE #A2 078 40106

GeoCore #1243

* This well was destroyed during excavation in December 2005.

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/15/2005 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/year) 6/2/2006 under the business name of GeoCore, Inc. by (signature) <i>Don Baxa</i>
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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.