

1 LOCATION OF WATER WELL: County: <u>Reno</u>	Fraction <u>NW 1/4 NW 1/4</u>	Section Number <u>22</u>	Township Number <u>24</u>	Range Number <u>10</u> EW																											
Distance and direction from nearest town or city street address of well if located within city? <u>Corner of Longview Rd. and Sylvia Rd.</u>																															
2 WATER WELL OWNER: <u>Lori and Drew Conrad</u> RR #, St. Address, Box # <u>33901 Lonview Rd.</u> City, State, ZIP Code <u>Sylvia, KS 67581</u> <div style="display: flex; justify-content: space-between;"> Board of Agriculture, Division of Water Resources Application Number: </div>																															
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF WELL <u>20</u> ft. WELL'S STATIC WATER LEVEL <u>0</u> ft. WELL WAS USED AS: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div style="width: 33%;"> 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning </div> <div style="width: 33%;"> 9 Dewatering <input checked="" type="checkbox"/> 10 Monitoring Well 11 Injection Well 12 Other </div> </div> 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 _____ No <u>X</u>																														
5 TYPE OF BLANK CASING USED: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 25%;">1 Steel</div> <div style="width: 25%;">3 RMP (SR)</div> <div style="width: 25%;">5 Wrought</div> <div style="width: 25%;">7 Fiberglass</div> <div style="width: 25%;">9 Other (Specify below)</div> <div style="width: 25%;"><input checked="" type="checkbox"/> 2 PVC</div> <div style="width: 25%;">4 ABS</div> <div style="width: 25%;">6 Asbestos-Cement</div> <div style="width: 25%;">8 Concrete Tile</div> </div> Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>X</u> No _____ If yes, how much <u>All</u> Casing height above or <u>below</u> land surface <u>2</u> in.																															
6 GROUT PLUG MATERIAL: <u>1 Neat cement</u> <u>2 Cement grout</u> <input checked="" type="checkbox"/> <u>3 Bentonite</u> <u>4 Other</u> Grout Plug Intervals: From <u>20</u> ft. to <u>3</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool </div> <div style="width: 33%;"> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div style="width: 33%;"> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div style="width: 33%;"> <input checked="" type="checkbox"/> 16 Other (specify below) <u>USI</u> </div> </div> Direction from well? <u>Northeast</u> How many feet? <u>350</u>																															
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>20</td> <td>3</td> <td>3/8 Bentonite chips</td> </tr> <tr> <td>3</td> <td>0</td> <td>Topsoil</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	PLUGGING MATERIALS	20	3	3/8 Bentonite chips	3	0	Topsoil																		
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7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>10-10-06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>665</u> This Water Well Record was completed on (mo/day/year) <u>10-20-06</u> under the business name of <u>Pratt Well Environmental</u> by (signature) <u>[Signature]</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, 1 000 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.																															