

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Edwards	NE 1/4 NE 1/4 SE 1/4	20	24	16 E/W <input checked="" type="checkbox"/>

Distance and direction from nearest town or city street address of well if located within city?
411 Larned, Belpre, KS

2	WATER WELL OWNER: Belpre O:1 Rosie Lee schmitt	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: 516 W Kansas	Application Number:
	City, State, ZIP Code : Greensburg KS 67054	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 32.7 ft.	MW 7
			WELL'S STATIC WATER LEVEL NA ft.	
		WELL WAS USED AS:		
		1 Domestic	5 Public Water Supply	9 Dewatering
		2 Irrigation	6 Oil Field Water Supply	<input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/>				
If yes, mo/day/yr sample was submitted				
Water Well Disinfected: Yes No <input checked="" type="checkbox"/>				

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 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No If yes, how much 0.6 ft
	Casing height above or below land surface NA 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 <input checked="" type="checkbox"/> 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
0	3	soil
3	32.7	Bentonite

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/13/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 1218106 under the business name of Larsen + Associates Inc This Water Well Record was completed on (mo/day/year) 12/8/06 by (signature)
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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.