

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Edwards	NW 1/4 SW 1/4 NW 1/4	12	T 24 S	R 16 E W

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

Approximately 1 3/4 miles north and 3 miles east of Belpre

2	WATER WELL OWNER: Frank L. Hart, Inc. c/o David J. Youtsey Sr. RR#, St. Address, Box # 1402 Austin Circle City, State, ZIP Code Salina, KS 67401	Board of Agriculture, Division of Water Resources Application Number: 23,303
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>94.2</u> ft
	WELL'S STATIC WATER LEVEL <u>24.2</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 <input checked="" type="checkbox"/>
	If yes, mo/day/yr sample was submitted _____
	Water Well Disinfected: Yes <input checked="" type="checkbox"/> No _____

5	TYPE OF BLANK CASING USED:		
1 Steel <input checked="" type="checkbox"/> 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)			
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile			
Blank casing diameter <u>16</u> in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/>			If yes, how much _____
Casing height above or <u>below</u> land surface <u>53</u> in.			

6	GROUT PLUG MATERIAL: 1 Neat Cement 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input checked="" type="checkbox"/> 4 Other _____			
Grout Plug Intervals: From <u>24</u> ft. to <u>4</u> ft., From <u>26</u> ft. to <u>24</u> ft. From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
1 Septic tank	6 Seepage pit	11 Fuel storage	<input checked="" type="checkbox"/> 16 Other (specify below)	
2 Sewer lines	7 Pit privy	12 Fertilizer storage	None known	
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
94	26	Chlorinated Sand
26	24	Bentonite Holeplug
24	4	Cement Grout
4	0	Compacted Soil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>01-21-09</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/year) <u>01-27-09</u> under the business name of <u>Clarke Well & Equipment, Inc.</u>	
by (signature)		

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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.