

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																											
	County: Finney	SE ¼ SE ¼ NW ¼	18	24	32																											
Distance and direction from nearest town or city street address of well if located within city? 410 N. 8th, Garden City																																
2	WATER WELL OWNER: KDHE 1000 SW Jackson St., Suite 410 RR #, St. Address, Box #: Topeka, KS 66612 City, State, ZIP Code : Topeka, KS 66612																															
Board of Agriculture, Division of Water Resources Application Number:																																
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="border: 1px solid black; padding: 5px; text-align: center;"> N <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">NW</td> <td style="width: 25%; text-align: center;">X</td> <td style="width: 25%;">NE</td> </tr> <tr> <td>W</td> <td></td> <td>E</td> </tr> <tr> <td>SW</td> <td></td> <td>SE</td> </tr> <tr> <td colspan="3" style="text-align: center;">S</td> </tr> </table> </div>		NW	X	NE	W		E	SW		SE	S			4 DEPTH OF WELL 17 ft. WELL'S STATIC WATER LEVEL n/a ft. WELL WAS USED AS: <table style="width: 100%;"> <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 Soil vapor extr.</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 Soil vapor extr.			
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Was a chemical / bacteriological sample submitted to Department? Yes No ...X... If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No ...X...																																
5	TYPE OF BLANK CASING USED: <table style="width: 100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>					1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile																		
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Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much 17' 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 0 ft. to 0.5 ft., From 0.5 ft. to 17 ft., From to ft. What is the nearest source of possible contamination: <table style="width: 100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table>					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								
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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) 3/10/2005 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) 4/1/2005 under the business name of GeoCore Inc. by (signature) <i>Dale Roll</i>																															

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.