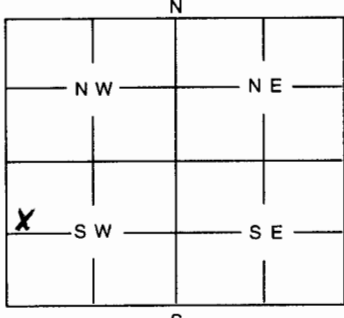


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>Reno</u>	<u>SW 1/4 NW 1/4 SW 1/4</u>	<u>10</u>	<u>24</u>	<u>7 W</u>

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

6714 S Partridge Rd

2	WATER WELL OWNER: <u>Laveta Moyer</u>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <u>6714 S Partridge Rd</u>	Application Number: _____
	City, State, ZIP Code: <u>Partridge, KS 67566</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>40</u> ft										
		WELL'S STATIC WATER LEVEL <u>25</u> ft.											
		WELL WAS USED AS:											
		<table style="width:100%;"> <tr> <td><input checked="" type="radio"/> 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 &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other _____</td> </tr> </table>		<input checked="" type="radio"/> 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
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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 <u>X</u> _____ If yes, mo/day/yr sample was submitted _____  Water Well Disinfected: Yes <u>X</u> No _____													

5	TYPE OF BLANK CASING USED:		
	1 Steel	<input checked="" type="radio"/> 3 RMP (SR)	5 Wrought
	2 PVC	4 ABS	6 Asbestos-Cement
			7 Fiberglass
			8 Concrete Tile
			9 Other (Specify below) _____
Blank casing diameter <u>6</u> in. Was casing pulled? Yes _____ No <u>X</u> If yes, how much _____			
Casing height above or below land surface <u>60</u> in.			

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other _____																						
	Grout Plug Intervals: From <u>5</u> ft. to <u>25</u> ft., From _____ ft. to _____ ft., From _____ to _____ ft.																						
What is the nearest source of possible contamination:																							
<table style="width:100%;"> <tr> <td><input checked="" type="radio"/> 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>				<input checked="" type="radio"/> 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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Direction from well? <u>N</u> How many feet? <u>25</u>																							

FROM	TO	PLUGGING MATERIALS
<u>5</u>	<u>25</u>	<u>Bentonite</u>
<u>25</u>	<u>40</u>	<u>Sand + Gravel</u>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>4-7-10</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>447</u> This Water Well Record was completed on (mo/day/year) <u>4-19-10</u> under the business name of <u>Miller Drilling</u> by (signature) <u>[Signature]</u>		
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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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.