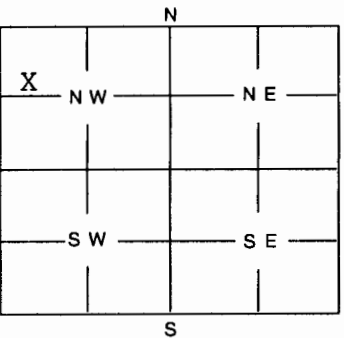


1	LOCATION OF WATER WELL: County: SEDGWICK	Fraction SW 1/4 NW 1/4 NW 1/4	Section Number 16	Township Number 25 SOUTH	Range Number 1 WEST
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Distance and direction from nearest town or city street address of well if located within city?
FROM BENTLEY, KS: 4 MILES EAST AND .25 MILE SOUTH

2	WATER WELL OWNER: RUSSELL & MARCIA GRAY RR #, St. Address, Box #: 720 N FRANKLIN City, State, ZIP Code: SEDGWICK, KS 67135	Board of Agriculture, Division of Water Resources Application Number: 14941 - DISMISSED
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4	DEPTH OF WELL 47 ft WELL'S STATIC WATER LEVEL 17.0 ft WELL WAS USED AS: <table border="0"> <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><u>3 Feedlot</u></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</td> </tr> </table> 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>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	<u>3 Feedlot</u>	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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5	TYPE OF BLANK CASING USED: <table border="0"> <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><u>2 PVC</u></td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> Blank casing diameter 6 in. Was casing pulled? Yes No <u>X</u> If yes, how much Casing height above or below land surface 36 in.	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	<u>2 PVC</u>	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other																				
Grout Plug Intervals: From <u>17</u> ft. to <u>3</u> ft., From ft. to ft., From ft. to ft.																					
What is the nearest source of possible contamination: <table border="0"> <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><u>10 Livestock pens</u></td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table> Direction from well? <u>SOUTHWEST</u> How many feet? 20		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	<u>10 Livestock pens</u>	15 Oil well/Gas well	
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FROM	TO	PLUGGING MATERIALS
47	17	COARSE SAND
17	3	BENTONITE CHIPS
3	0	TOPSOIL

PLUGGING WITNESSED BY TIM BOESE
EQUUS BEDS GMD#2

RECEIVED

APR - 3 2002

EQUUS BEDS GROUNDWATER
MANAGEMENT DISTRICT NO. 2

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/21/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. N/A This Water Well Record was completed on (mo/day/year) 3/30/02 by (signature) <u><i>Marcia Gray</i></u> <u><i>Russell Gray</i></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.