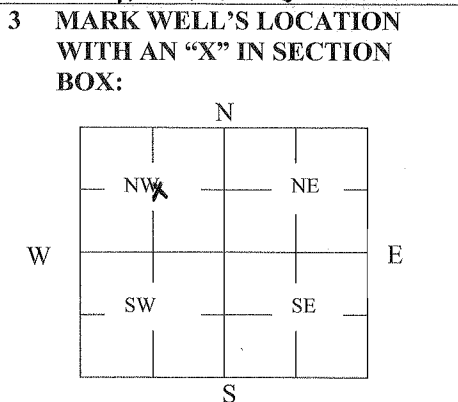


**1 LOCATION OF WATER WELL:** Fraction 1/4 NC 1/4 NW 1/4 Section Number 32 Township Number 25 Range Number 17 E/W

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

**2 WATER WELL OWNER:**  
**KATHRYN MAYHEW**  
 RR#, St. Address, Box #: 1931 270th AV  
 City, State ZIP Code: HAULAND KAN 67059

**Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: \_\_\_\_\_  
 Longitude: \_\_\_\_\_  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_



**4 DEPTH OF WELL** 127 ft.  
 WELL'S STATIC WATER LEVEL 38 ft.

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	10 Monitoring
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 \_\_\_\_\_

**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 16 in. Was casing pulled? Yes \_\_\_\_\_ No X If yes, how much \_\_\_\_\_  
 Casing height above or below land surface 60" BELOW 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	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	Direction from well? <u>SW</u>
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? <u>40'</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
SURFACE	5'	SOIL			
5'	25'	CEMENT			
25'	127'	CHLORINATED GRAVEL			

RECEIVED  
 JAN 02 2013  
 BUREAU OF WATER

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4-1-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \_\_\_\_\_. This Water Well Record was completed on (mo/day/year) 12-21-12 under the business name of \_\_\_\_\_ by (signature) Kathryn Mayhew