

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: SEDGWICK	SW 1/4 SW 1/4	24	T25S	R2W E/W

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

1/4 mile south of 9542 N. 135th St. W Sedgwick KS 67135

2	WATER WELL OWNER: Duane Carmichael 9542 N. 135th St. W RR #, St. Address, Box #: City, State, ZIP Code : Sedgwick KS 67135	Board of Agriculture, Division of Water Resources Application Number: Unknown
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 34 ft. WELL'S STATIC WATER LEVEL 12 ft. WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other
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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 **X** No

5	TYPE OF BLANK CASING USED:
	1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (Specify below)
	Blank casing diameter 8 in. Was casing pulled? Yes X No If yes, how much 3 ft Casing height above or below and surface 36 in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
	Grout Plug Intervals: From 12 ft. to 3 ft., From ft. to ft., From to ft.
	What is the nearest source of possible contamination:
	1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) ag field
	Direction from well? EAST How many feet? 10 ft.

FROM	TO	PLUGGING MATERIALS
3	0	Topsoil
12	3	Bentonite
34	12	Sand / bleach (gravel)

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/26/03 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractors License No. 628 This Water Well Record was completed on (mo/day/year) 8/26/03 under the business name of J. MENTORISES by (signature) [Signature]
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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, 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.