

1	LOCATION OF WATER WELL:	Fraction Lot 3	Section Number	Township Number	Range Number
	County: Kearny	$\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	2	26	36

Distance and direction from nearest town or city street address of well if located within city? **From south side of Lakin, 1 M. S., 1/2 M. E., 6 M. S. to Parallel Rd., 1-3/4 M. E., 1-1/3rd M. S., 5,505 Ft. North & 3,530 Ft. W.**

2	WATER WELL OWNER: American Land & Cattle
	RR #, St. Address, Box #: PO Box 897
	City, State, ZIP Code: Garden City, KS 67846
	Board of Agriculture, Division of Water Resources Application Number: 21,546

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 240 ft																										
	<div style="text-align: center;">N</div> <table border="1"> <tr> <td></td> <td style="text-align: center;">X</td> <td></td> </tr> <tr> <td style="text-align: center;">NW</td> <td></td> <td style="text-align: center;">NE</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">SW</td> <td></td> <td style="text-align: center;">SE</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table> <div style="text-align: center;">S</div>		X		NW		NE				SW		SE				WELL'S STATIC WATER LEVEL 170 ft. WELL WAS USED AS: <table> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input checked="" type="radio"/> 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</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	<input checked="" type="radio"/> 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
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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:
	<input checked="" type="radio"/> 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <input type="radio"/> 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
	Blank casing diameter 16 in. Was casing pulled? Yes No X Casing height above or below land surface 36 in. Below If yes, how much

6	GROUT PLUG MATERIAL: 1 Neat cement <input checked="" type="radio"/> 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From 3 ft. to 170 ft., From ft. to ft., From ft. to ft.																				
	What is the nearest source of possible contamination: <table> <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>N/A</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	N/A	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? How many feet?																				

FROM	TO	PLUGGING MATERIALS
0	3	Top soil
3	170	Cement Grout
170	240	Chlorinated Gravel

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-12-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 208 This Water Well Record was completed on (mo/day/year) 1-13-09 under the business name of Minter-Wilson Drilling Co., Inc. by (signature) <i>Nora Keller</i>
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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.