

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Gray	NE $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$	27	26S	27W EW

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

N/A

2	WATER WELL OWNER: Powerline Dairy, LLC dba Forget-me-not Farms	
	RR #, St. Address, Box #: PO Box 1240, Cimarron, KS 67835	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code :	Application Number: 25,265

3	<p>MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p>	4	<p>DEPTH OF WELL 250 ft.</p> <p>WELL'S STATIC WATER LEVEL 77 ft.</p> <p>WELL WAS USED AS:</p> <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>X 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> <p>Was a chemical / bacteriological sample submitted to Department? Yes No X</p> <p>If yes, mo/day/yr sample was submitted</p> <p>Water Well Disinfected: Yes No X</p>	1 Domestic	5 Public Water Supply	9 Dewatering	X 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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5	TYPE OF BLANK CASING USED:	
	<input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 2 PVC <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 4 ABS <input type="checkbox"/> 5 Wrought <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> 8 Concrete Tile <input type="checkbox"/> 9 Other (Specify below)	
	Blank casing diameter 16 in.	Was casing pulled? Yes X No
	Casing height above or below land surface	If yes, how much 8 feet

6	GROUT PLUG MATERIAL:	
	<input type="checkbox"/> 1 Neat cement <input checked="" type="checkbox"/> 2 Cement grout <input type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other	
	GROUT PLUG INTERVALS: From 8 feet ft. to 250 ft.	From ft. to ft. From ft. to ft.
	What is the nearest source of possible contamination:	
	<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 7 Pit privy <input checked="" type="checkbox"/> 8 Sewage lagoon <input checked="" type="checkbox"/> 9 Feedyard <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 13 Insecticide storage <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 15 Oil well/Gas well <input type="checkbox"/> 16 Other (specify below)	
	Direction from well? N/A	How many feet? <50 feet

FROM	TO	PLUGGING MATERIALS
0 feet	8 feet	Compacted Soil
8 feet	250 feet	Cement Grout

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 04/28/2008 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) 10/31/2008
	by (signature) [Signature] under the business name of Powerline Dairy, LLC dba Forget-me-not Farms	

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.