

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Gray	nw nw 1/4 se 1/4 ne 1/4	11	26	28

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

2 WATER WELL OWNER: **Grasser Oil**

RR#, St. Address, Box #

Board of Agriculture, Division of Water Resources

City, State, ZIP Code : **Cimmaron, Ksa 67835**

Application Number:

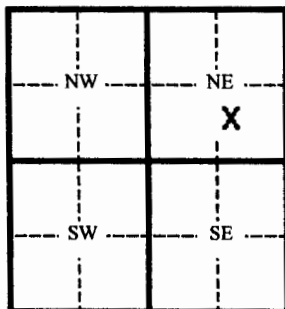
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

W

E

S

4 DEPTH OF WELL 38.8 ft.

WELL'S STATIC WATER LEVEL _____ ft.

WELL WAS USED AS:

1 Domestic

5 Public Water Supply

9 Dewatering

2 Irrigation

6 Oil Field Water Supply

☒ 10 Monitoring Well

3 Feedlot

7 Lawn and Garden (domestic)

11 Injection Well

4 Industrial

8 Air Conditioning

12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____

If yes, mo/day/yr sample was submitted _____

Water Well Disinfected: Yes _____ No _____

5 TYPE OF BLANK CASING USED:

1 Steel

3 RMP (SR)

5 Wrought

7 Fiberglass

9 Other (specify below)

☒ 2 PVC

4 ABC

6 Asbestos-Cement

8 Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes _____ No _____ If yes, how much _____Casing height above or below land surface -36 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 _____ ft. 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

5 Cess Pool

10 Livestock pens

15 Oil well/ Gas well

Direction from well? _____

How many feet? _____

FROM	TO	CODE	PLUGGING MATERIALS
38.8	3		Benonite
3	0		topsoil
			Drilled out 20 ft.

7

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 4-13-05 and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. 554

This Water Well Record was completed on (mo/day/yr)

5-13-05

under the business name of

Woofter Pump & Well Inc.by (signature) Jay C. Woofter

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S.W. Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.