

1	LOCATION OF WATER WELL:	Fraction <i>SE 1/4 NE 1/4 NW 1/4</i>	Section Number <i>11</i>	Township Number <i>26</i>	Range Number <i>28W</i>																				
County: <i>Gray</i> Distance and direction from nearest town or city street address of well if located within city? <i>402 W Ave A</i>																									
2	WATER WELL OWNER: <i>Osborn 64</i>	RR #, St. Address, Box #: <i>402 W Ave A</i> City, State, ZIP Code : <i>Cimarron KS 67835</i>																							
Board of Agriculture, Division of Water Resources Application Number:																									
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <i>43</i> ft.	WELL'S STATIC WATER LEVEL <i>PR 4</i> ft.																					
		WELL WAS USED AS:																							
<input checked="" type="checkbox"/> 1 Domestic <input checked="" type="checkbox"/> 2 Irrigation <input checked="" type="checkbox"/> 3 Feedlot <input checked="" type="checkbox"/> 4 Industrial				<input checked="" type="checkbox"/> 5 Public Water Supply <input checked="" type="checkbox"/> 6 Oil Field Water Supply <input checked="" type="checkbox"/> 7 Domestic (Lawn & Garden) <input checked="" type="checkbox"/> 8 Air Conditioning		<input checked="" type="checkbox"/> 9 Dewatering <input checked="" type="checkbox"/> 10 Monitoring Well <input checked="" type="checkbox"/> 11 Injection Well <input checked="" type="checkbox"/> 12 Other																			
Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>																									
If yes, mo/day/yr sample was submitted																									
Water Well Disinfected: Yes No <input checked="" type="checkbox"/>																									
5	TYPE OF BLANK CASING USED:																								
<input checked="" type="checkbox"/> 1 Steel <input checked="" 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 <i>2</i> in. Was casing pulled? Yes No If yes, how much																									
Casing height above or below land surface <i>6</i> in.																									
6	GROUT PLUG MATERIAL: <input type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other																								
Grout Plug Intervals: From <i>0</i> ft. to <i>5</i> ft., From <i>5</i> ft. to <i>26</i> ft., From to ft.																									
What is the nearest source of possible contamination:																									
<table> <tbody> <tr> <td><input type="checkbox"/> 1 Septic tank</td> <td><input type="checkbox"/> 6 Seepage pit</td> <td><input type="checkbox"/> 11 Fuel storage</td> <td><input checked="" type="checkbox"/> 16 Other (specify below) <i>UST</i></td> </tr> <tr> <td><input type="checkbox"/> 2 Sewer lines</td> <td><input type="checkbox"/> 7 Pit privy</td> <td><input type="checkbox"/> 12 Fertilizer storage</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 3 Watertight sewer lines</td> <td><input type="checkbox"/> 8 Sewage lagoon</td> <td><input type="checkbox"/> 13 Insecticide storage</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 4 Lateral lines</td> <td><input type="checkbox"/> 9 Feedyard</td> <td><input type="checkbox"/> 14 Abandoned water well</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 5 Cess pool</td> <td><input type="checkbox"/> 10 Livestock pens</td> <td><input type="checkbox"/> 15 Oil well/Gas well</td> <td></td> </tr> </tbody> </table>						<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 11 Fuel storage	<input checked="" type="checkbox"/> 16 Other (specify below) <i>UST</i>	<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 12 Fertilizer storage		<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 13 Insecticide storage		<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 14 Abandoned water well		<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 15 Oil well/Gas well	
<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 11 Fuel storage	<input checked="" type="checkbox"/> 16 Other (specify below) <i>UST</i>																						
<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 12 Fertilizer storage																							
<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 13 Insecticide storage																							
<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 14 Abandoned water well																							
<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 15 Oil well/Gas well																							
Direction from well? <i>S</i> How many feet? <i>20</i>																									
FROM	TO	PLUGGING MATERIALS																							
<i>0</i>	<i>43</i>	<i>20-30% solid bentonite</i> <i>Slurry grout with top 5 feet overdrilled after grouting</i>																							
7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <i>4/14/05</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>594</i> This Water Well Record was completed on (mo/day/year) <i>5/19/05</i> under the business name of <i>Coranee Great Plains</i> by (signature) <i>C. J. S.</i>																								

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.