

<b>1</b> LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Gray</b>	<b>SE ¼ NW ¼ NE ¼</b>	<b>11</b>	<b>26</b>	<b>28</b>
Distance and direction from nearest town or city street address of well if located within city?				

  

<b>2</b> WATER WELL OWNER: <b>Grain Growers Coop</b>	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # <b>202 N Main</b>	
City, State, ZIP Code : <b>Cimarron, KS 67835</b>	

  

<b>3</b> MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	<b>4</b> DEPTH OF WELL <b>50</b> ft.
	WELL'S STATIC WATER LEVEL <b>Dry</b> ft.
	WELL WAS USED AS:
	<div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden (domestic) 8 Air Conditioning </div> <div> 9 Dewatering <b>10</b> Monitoring Well 11 Injection Well 12 Other </div> </div>
	Was a chemical/bacteriological sample submitted to Department? Yes ___ No <b>X</b> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes ___ No <b>X</b>

  

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

  

<b>6</b> GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <b>3</b> Bentonite 4 Other _____	
Grout Plug Intervals From <b>0</b> ft. to <b>50</b> ft. From _____ ft. to _____ ft. From _____ ft. 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) <b>Previously Contaminated Site</b>
Direction from well? _____ How many feet? _____	

  

FROM	TO	CODE	PLUGGING MATERIALS
<b>50</b>	<b>3</b>		<b>Bentonite</b>
<b>3</b>	<b>0</b>		<b>Native Soil</b>

  

<b>7</b>	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <b>5/16/06</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>554</b> This Water Well Record was completed on (mo/day/yr) <b>6/26/06</b> under the business name of <b>Woofter Pump &amp; Well Inc.</b> by (signature) <i>[Signature]</i>
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**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.