

1	LOCATION OF WATER WELL:	Fraction 1/4	NW 1/4	Section 20	Township 26	Range 30	Number W
County: Gray							

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

8 miles Southwest of Charleston

2	WATER WELL OWNER: Herman J. Smith	RR #, St. Address, Box #: 15203 3rd	Board of Agriculture, Division of Water Resources Application Number: 19745				
City, State, ZIP Code : Ingalls, Kans 67853							

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL ..... 196 ft				
			WELL'S STATIC WATER LEVEL ..... 155 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 Domestic (Lawn & Garden)	11 Injection Well			
		4 Industrial	8 Air Conditioning	12 Other .....			
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 ..... in.		Was casing pulled? Yes ..... No X		If yes, how much .....			
Casing height above or below land surface ..... 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	.....				

FROM	TO	PLUGGING MATERIALS
195'	150'	gravel
150'	11'	clay dirt
11'	5'	Bentonite - mushroom over borehole
5'		cut off

Closed ourselves

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/18/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ..... This Water Well Record was completed on (mo/day/year) ..... under the business name of ..... by (signature) ..... <i>Herman J. Smith</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.