

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<u>Hamilton</u>	<u>S</u> <u>W</u> <u>1/4</u> <u>1/4</u>	<u>2</u>	<u>26</u>	<u>39</u> E/W

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

26 miles to the SE of Syracuse Ks.

2	WATER WELL OWNER: <u>David Fairbanks</u>
RR #, St. Address, Box #:	<u>10207 Golf Course Road</u>
City, State, ZIP Code	<u>Ocean City Maryland 21842</u>
Board of Agriculture, Division of Water Resources	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>15.6</u> ft.
		WELL'S STATIC WATER LEVEL <u>15.6</u> ft. WELL WAS USED AS: <input checked="" type="radio"/> 1 Domestic 5 Public Water Supply 9 Dewatering <input type="radio"/> 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well <input type="radio"/> 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well <input type="radio"/> 4 Industrial 8 Air Conditioning 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 <input checked="" type="checkbox"/> No			

5	TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <input checked="" type="radio"/> 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter <u>6</u> in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much Casing height above or below land surface <u>36</u> in.	

6	GROUT PLUG MATERIAL:
1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other Grout Plug Intervals: <u>From 15.6 ft. to 140 ft.</u> <u>From 10 ft. to 0 ft.</u> From to ft.	
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) <u>None</u> 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 <input checked="" type="radio"/> 15 Oil well/Gas well	
Direction from well? <u>NE</u> How many feet? <u>2000</u>	

FROM	TO	PLUGGING MATERIALS
140	<u>10 ft.</u>	<u>Chlorinated Sand</u>
<u>3</u>	<u>0</u>	<u>Top Soil</u>
<u>10</u>	<u>3</u>	<u>Bentonite</u>
<u>10</u>	<u>140</u>	<u>Clay soil</u>
<u>156</u>	<u>140</u>	<u>Chlorinated Sand</u>

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 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) <u>Dan ReWitt</u> <u>10-29-09</u>
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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, 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.