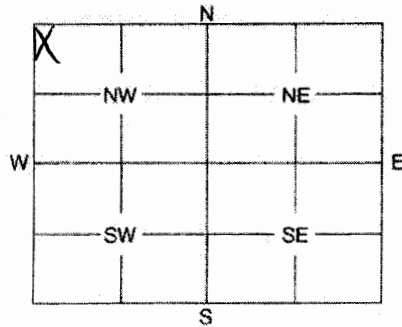


1	LOCATION OF WATER WELL: Sedgwick	Fraction NW $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	Section 25	Number	Township 27	Number	Range 1	Number
County: Sedgwick								

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

240 S. West Street, Wichita, Ks2 WATER WELL OWNER: **Town and Country #73**RR #, St. Address, Box #: **240 S. West Street**
City, State, ZIP Code : **Wichita, Ks**Board of Agriculture, Division of Water Resources
Application Number:

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

4 DEPTH OF WELL **19.6** ft.WELL'S STATIC WATER LEVEL **15.69** ft.

WELL WAS USED AS:

- 1 Domestic
- 2 Irrigation
- 3 Feedlot
- 4 Industrial

- 5 Public Water Supply
- 6 Oil Field Water Supply
- 7 Domestic (Lawn & Garden)
- 8 Air Conditioning

- 9 Dewatering
- 10 Monitoring Well**
- 11 Injection Well
- 12 Other

Was a chemical / bacteriological sample submitted to Department? Yes No **X**
If yes, mo/day/yr sample was submittedWater Well Disinfected: Yes No **X**

5 TYPE OF BLANK CASING USED:

- 1 Steel
- 2 PVC**
- 3 RMP (SR)
- 4 ABS
- 5 Wrought
- 6 Asbestos-Cement
- 7 Fiberglass
- 8 Concrete Tile
- 9 Other (Specify below)

Blank casing diameter **2** in. Was casing pulled? Yes **X** No If yes, how much **20** in.
Casing height above or below land surface in.6 GROUT PLUG MATERIAL: **3** 1 Neat cement 2 Cement grout **3** Bentonite 4 Other
Grout Plug Intervals: From **20** ft. to **0** ft., From ft. to ft., From 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)
Onsite

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
20	0	Bentonite grout

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **11/07/06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/year) **11/28/06** under the business name of **Associated Environmental, Inc.**
by (signature) **B. Johnson**

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.