

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	PRATT	1/4 1/4 C 1/4 NE	6	27	13 EW

Distance and direction from nearest town or city street address of well if located within city?  
 2 miles West of Iuka 1/4 South 1/4 West to well

2 WATER WELL OWNER: Jerry Bohn  
 RR #, St. Address, Box #: 5019 W. WAVECREST CIR.  
 City, State, ZIP Code: WICHITA, KS 67205  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL ..... 152 ..... ft.
		WELL'S STATIC WATER LEVEL ..... 53 ..... 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 <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:

<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> 9 Other (Specify below)
<input type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 8 Concrete Tile	

Blank casing diameter ..... 16 ..... in.      Was casing pulled? Yes ..... No  ..... If yes, how much .....  
 Casing height above or below land surface ..... 84 ..... in.

6 GROUT PLUG MATERIAL:      1 Neat cement      2 Cement grout       3 Bentonite      4 Other .....

Grout Plug Intervals:      From ..... 53 ..... ft. to ..... 7 ..... ft.,      From ..... ft. to ..... ft.,      From ..... 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	

Direction from well? ..... 999 .....      How many feet? ..... 999 .....

FROM	TO	PLUGGING MATERIALS
152	53	Sand
53	7	Bentonite
7	0	Natural Soil

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-19-2021 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 672 This Water Well Record was completed on (mo/day/year) 1-25-2021 under the business name of CROWDIS WATER WELL SERV. by (signature) [Signature]

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.