

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Kiowa</u>	<u>1/4 NC 1/4 SE 1/4</u>	<u>8</u>	<u>T 27 S</u>	<u>R 18 E</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">W</span>

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

Approximately 6 1/4 miles north and 1/2 mile west of Greensburg

2	WATER WELL OWNER: <u>Mark Rohlman</u>	Board of Agriculture, Division of Water Resources
	RR#, St. Address, Box # <u>520 S. Stone Ridge</u>	Application Number: <u>23,869</u>
	City, State, ZIP Code <u>Valley Center, KS 67147</u>	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>135</u> ft												
	WELL'S STATIC WATER LEVEL <u>49</u> ft.												
	WELL WAS USED AS:												
	<table style="width:100%; border: none;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2 Irrigation</span></td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2 Irrigation</span>	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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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  No \_\_\_\_\_

5	TYPE OF BLANK CASING USED:			
	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">1 Steel</span>	3 RMP (SR)	5 Wrought	7 Fiberglass
	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile
	Blank casing diameter <u>16</u> in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/>			
	Casing height above or below land surface <u>At Ground Level</u> in. If yes, how much _____			

6	GROUT PLUG MATERIAL: 1 Neat Cement <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2 Cement grout</span> 3 Bentonite 4 Other _____			
	Grout Plug Intervals: From <u>49</u> ft. to <u>0</u> 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	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">16 Other (specify below)</span>
	2 Sewer lines	7 Pit privy	12 Fertilizer storage	None known
	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? _____ How many feet? _____			

FROM	TO	PLUGGING MATERIALS
135	118	Cave in
118	49	Chlorinated sand
49	0	Cement grout

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>04-09-08</u> and this record is true to the best of my knowledge and belief. Kansas	
	Water Well Contractor's License No. <u>771</u>	This Water Well Record was completed on (mo/day/year) <u>04-10-08</u>
	under the business name of <u>Clarke Well &amp; Equipment, Inc.</u>	
	by (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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.