

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>kiowa</u>	<u>1/4 NW 1/4 NE 1/4 SW</u>	<u>33</u>	<u>27</u>	<u>18</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">EW</span>

Distance and direction from nearest town or city street address of well if located within city? From Greensburg 90 N. on 30th Ave To 6 St. Then west to 29th Ave 5/8 North 1/2 E & S.E. to well

2 WATER WELL OWNER: <u>STERLING Drilling</u>	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #: <u>PO Box 1006</u>	Application Number: _____
City, State, ZIP Code: <u>Pratt, KS 67124</u>	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>125</u> ft.											
	WELL'S STATIC WATER LEVEL <u>54</u> ft.											
	WELL WAS USED AS:											
	<table style="width:100%; border: none;"> <tr> <td style="width:33%;">1 Domestic</td> <td style="width:33%;">5 Public Water Supply</td> <td style="width:33%;">9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td><input checked="" type="radio"/> 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	2 Irrigation	<input checked="" type="radio"/> 6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning
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2 Irrigation	<input checked="" type="radio"/> 6 Oil Field Water Supply	10 Monitoring Well										
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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 <input checked="" type="checkbox"/> No .....											

5 TYPE OF BLANK CASING USED:			
1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass
<input checked="" type="radio"/> 2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile
9 Other (Specify below) .....			
Blank casing diameter <u>5</u> in.		Was casing pulled? Yes <input checked="" type="checkbox"/> No .....	
Casing height above or below land surface <u>3.6</u> in.		If yes, how much <u>3 FT</u>	

6 GROUT PLUG MATERIAL:			
1 Neat cement	2 Cement grout	<input checked="" type="radio"/> 3 Bentonite	<input checked="" type="radio"/> 4 Other <u>CLAY TOP SOIL</u>
Grout Plug Intervals: From <u>24</u> ft. to <u>3</u> ft., From <u>3</u> ft. to <u>0</u> ft., From ..... to .....			
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? <u>999</u>		How many feet? <u>999</u>	

FROM	TO	PLUGGING MATERIALS
<u>125</u>	<u>24</u>	<u>SAND</u>
<u>24</u>	<u>3</u>	<u>BENTONITE</u>
<u>3</u>	<u>0</u>	<u>CLAY TOP SOIL</u>

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>3-11-15</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>672</u> This Water Well Record was completed on (mo/day/year) <u>3-12-15</u> under the business name of <u>CROWD'S WATER WELL SUR.</u> by (signature) <u>[Signature]</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.