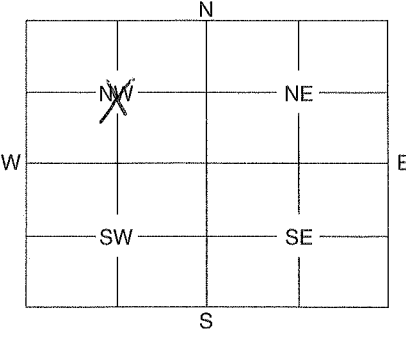


1	LOCATION OF WATER WELL:	Fraction <u>Near Center</u>	Section Number	Township Number	Range Number
	County: <u>Gray</u>	$\frac{1}{4}$ $\frac{1}{4}$ <u>NW</u>	<u>31</u>	<u>27</u>	<u>27</u> E/W

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

5 mile west & 3/4 north of Ensign

2	WATER WELL OWNER: <u>Gary Etling</u>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <u>P.O. Box 27</u>	Application Number: <u>existing well</u>
	City, State, ZIP Code: <u>Ensign, KS 67841</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>237</u> ft.												
		WELL'S STATIC WATER LEVEL <u>210</u> ft.													
		WELL WAS USED AS:													
		<table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & 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	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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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 <u>✓</u>															
If yes, mo/day/yr sample was submitted															
Water Well Disinfected: Yes <u>✓</u> No															

5	TYPE OF BLANK CASING USED:			
	<input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC	<input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 4 ABS	<input type="checkbox"/> 5 Wrought <input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> 8 Concrete Tile
	<input type="checkbox"/> 9 Other (Specify below)			
	Blank casing diameter <u>16</u> in. Was casing pulled? Yes No <u>✓</u> If yes, how much			
	Casing height above or below land surface <u>4 ft</u> in.			

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="checkbox"/> Bentonite	4 Other
	Grout Plug Intervals:	From <u>13</u> ft.	to <u>3</u> 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 <input checked="" type="checkbox"/> 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)	
	Direction from well? <u>NW</u> How many feet? <u>9000</u>				

FROM	TO	PLUGGING MATERIALS
<u>237</u>	<u>200</u>	<u>chlorinated sand 8oz. of dry chlorine</u>
<u>200</u>	<u>13</u>	<u>sand</u>
<u>13</u>	<u>3</u>	<u>bentonite</u>
<u>3</u>	<u>0</u>	<u>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>1-15-12</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>01111111</u> This Water Well Record was completed on (mo/day/year)
	by (signature) <u>Gary Etling</u> under the business name of

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.