

1	LOCATION OF WATER WELL:	Fraction <u>NE</u> <u>NE</u> 1/4 1/4 1/4	Section Number <u>31</u> <u>31</u>	Township Number <u>T2</u> <u>75</u> <u>TX</u> <u>75</u>	Range Number <u>R3</u> <u>W</u> <u>R3</u> <u>W</u>	E/W
County: <u>Sedgwick</u>						

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

911 N. Main Garden Plain, KS 6750

2	WATER WELL OWNER: <u>Travis & Terretta Gerlach</u>	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #: <u>911 N. main</u>		Application Number:
City, State, ZIP Code: <u>Garden Plain, KS 67050</u>		

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>30</u> ft.
		WELL'S STATIC WATER LEVEL <u>21</u> 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 ☒			
If yes, mo/day/yr sample was submitted			
Water Well Disinfected: Yes ☒ No			

5	TYPE OF BLANK CASING USED: <u>Driven well is steel; cased well is RVC or occasionally galvanized metal</u>
☒ 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 in. Was casing pulled? Yes No If yes, how much	
Casing height above or below land surface in.	

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ☒ 3 Bentonite 4 Other
Grout Plug Intervals: From ft. to ft. From ft. to ft. From ft. to ft.	
What is the nearest source of possible contamination: <u>3 ft below ground level & down; concrete on top of well where it was cut.</u>	
☒ 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)	
Direction from well? <u>North</u> How many feet? <u>20</u>	

FROM	TO	PLUGGING MATERIALS
<u>40'</u>	<u>3'</u>	<u>Bentonite</u>

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>6/21/01</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>none owner</u> This Water Well Record was completed on (mo/day/year) <u>6/21/01</u>
by (signature) <u>Terretta A. Gerlach</u>	

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.