

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: Sedgwick	NW 1/4 NE 1/4 NW 1/4	35		T 28 S		R 1 E	(W)

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

Approximately 1 3/4 miles west of Haysville

2	WATER WELL OWNER: Vulcan Materials Company
	RR#, St. Address, Box # P.O. Box 12283
	City, State, ZIP Code Wichita, KS 67277
	Board of Agriculture, Division of Water Resources Application Number: _____

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 50.78 ft.
			WELL'S STATIC WATER LEVEL 37.18 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:
	☐ 1 Steel ☐ 3 RMP (SR) ☐ 5 Wrought ☐ 7 Fiberglass ☐ 9 Other (Specify below) ☒ 2 PVC ☐ 4 ABS ☐ 6 Asbestos-Cement ☐ 8 Concrete Tile
	Blank casing diameter 5 in. Was casing pulled? Yes _____ No ☒
	Casing height above or ☒ below land surface 48 in. If yes, how much Cut off

6	GROUT PLUG MATERIAL:	1 Neat Cement	2 Cement grout	3 Bentonite	4 Other	Bentonite Holeplug
	Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft. From 50.78 ft. to 4 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 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
50.78	4	Bentonite Holeplug
4	0	Soil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-9-01 and this record is true to the best of my knowledge and belief. Kansas
	Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 7-27-01
	under the business name of Clarke Well & Equipment, Inc.
	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.