

1	LOCATION OF WATER WELL:	Fraction <u>NW 1/4 SE 1/4 NW 1/4</u>	Section Number <u>12</u>	Township Number <u>28S</u>	Range Number <u>28S 1W</u>																								
County: <u>Sedgewick</u>																													
Distance and direction from nearest town or city street address of well if located within city? <u>3402 S. Knight</u>																													
2	WATER WELL OWNER: <u>Remax w. nagle</u>																												
RR #, St. Address, Box #: City, State, ZIP Code :			Board of Agriculture, Division of Water Resources Application Number:																										
<u>10100 W. Maple</u> <u>Wichita, KS 67209</u>																													
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4	DEPTH OF WELL <u>23</u> ft																									
N <table border="1" style="width:100%; height:100px; border-collapse: collapse;"> <tr> <td style="width:25%; text-align: center;">NW</td> <td style="width:25%; text-align: center;">NE</td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> <tr> <td style="text-align: center;">X</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">S</td> <td></td> <td></td> <td></td> </tr> </table> S		NW	NE			X				SW	SE			S				WELL'S STATIC WATER LEVEL <u>10</u> ft.											
		NW	NE																										
		X																											
		SW	SE																										
S																													
WELL WAS USED AS:																													
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																													
Was a chemical / bacteriological sample submitted to Department? Yes No <u>X</u>																													
If yes, mo/day/yr sample was submitted																													
Water Well Disinfected: Yes <u>X</u> 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 <u>2</u> in. Was casing pulled? Yes No <u>X</u> 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 <u>10</u> ft. to <u>0</u> ft., From ft. to ft., From to ft.																													
What is the nearest source of possible contamination:																													
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) <u>house</u> 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>north</u> How many feet? <u>1</u>																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:15%;">TO</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>23</u></td> <td><u>10</u></td> <td><u>gravel</u></td> </tr> <tr> <td><u>10</u></td> <td><u>0</u></td> <td><u>cement</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	PLUGGING MATERIALS	<u>23</u>	<u>10</u>	<u>gravel</u>	<u>10</u>	<u>0</u>	<u>cement</u>															
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>11-27-01</u> <u>3:18</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's license No. <u>11-27-01</u> under the business name of <u>Weninger Drilling Inc.</u>																												
by (signature) <u>Michael Gorga</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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.																													