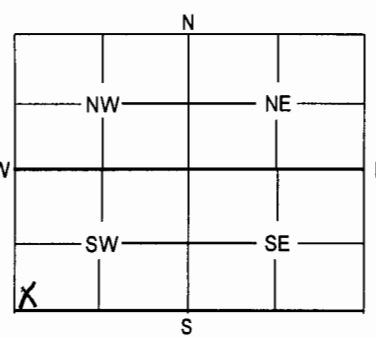


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Kiowa	SW ^{1/4} SW ^{1/4} SW ^{1/4}	16	28	17 EW

Distance and direction from nearest town or city street address of well if located within city?
J Street & Avenue 41

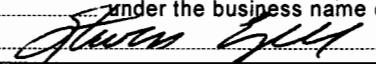
2	WATER WELL OWNER: Milton Ross	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box # RR 2	Application Number:
	City, State, ZIP Code Haviland, KS 67059	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 150 ft.
			WELL'S STATIC WATER LEVEL 98 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 X if yes, mo/day/yr sample was submitted _____
			Water Well Disinfected: Yes X No _____

5	TYPE OF BLANK CASING USED:
	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 5 in.
	Casing height above or below land surface 4 ft B.L.S.
	Was casing pulled? Yes _____ No X If yes, how much _____

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other Topsoil
	Grout Plug Intervals:	From 150 ft.	to 4 ft B.L.S. ft.	From 4 ft B.L.S. ft.	to 0 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 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? 999		How many feet? 999		

FROM	TO	PLUGGING MATERIALS
150'	4'	Bentonite chips, hydrated
4'	0'	Topsoil

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/6/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 7/8/09 under the business name of Pratt Well Service, 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 and Environment, Bureau of Water, Geology Section, 1 000 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.

White