

1 LOCATION OF WATER WELL: Fraction SW 1/4 Section 16 Township 29 Range 32
 County: Haskell

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

2 WATER WELL OWNER: Vern Rutledge
 RR #, St. Address, Box #: _____
 City, State, ZIP Code: _____
 Board of Agriculture, Division of Water Resources
 Application Number: _____

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	
NW	NE
SW	SE
S	

X is located in the SE corner of the SW 1/4 section.

4 DEPTH OF WELL 450 ft
 WELL'S STATIC WATER LEVEL 340 ft.
 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 X
 If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected: Yes X 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 16 in. Was casing pulled? Yes _____ No X If yes, how much _____
 Casing height above or below land surface 60 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:
 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) _____
 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? NE How many feet? 1,000

FROM	TO	PLUGGING MATERIALS
450	340	chlorinated sand
345	10	Clay/Subsoil
10	5	Bentonite
5	-	Cut off Casing & Backfill

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-9-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 11-9-01 under the business name of Southwest Windmill This Water Well Record was completed on (mo/day/year) _____ by (signature) Dave Ems

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.