

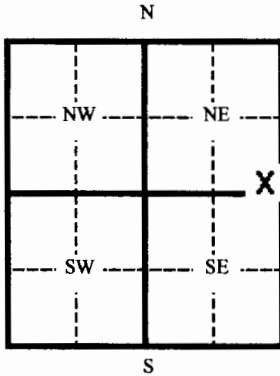
1	LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
	County: NORTON SE ¼ SE ¼ NE ¼	26	2S	22W

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

Rt 1, Calvert, KS 66676

2	WATER WELL OWNER: Ruby Thornton	Board of Agriculture, Division of Water Resources
	RR#, St. Address, Box # 4647 SE 2nd ST	Application Number:
	City, State, ZIP Code : Tecumseh, KS 66542	

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



4 DEPTH OF WELL **42** ft.

WELL'S STATIC WATER LEVEL _____ ft.

WELL WAS USED AS:

- | | | |
|--------------|------------------------------|---|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | 10 <input checked="" type="radio"/> Monitoring Well |
| 3 Feedlot | 7 Lawn and Garden (domestic) | 11 Injection Well |
| 4 Industrial | 8 Air Conditioning | 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 <input checked="" type="radio"/> PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter **2** in. Was casing pulled? Yes No _____ If yes, how much **20 FT**

Casing height above or below land surface **-20 ft** in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Plug Intervals From **0** ft. to **3** ft. From **3** ft. to **42** 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 | Contaminated Site |
| 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	CODE	PLUGGING MATERIALS
42	3		Bentonite
3	0		Cement

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) **10/24/05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **554** This Water Well Record was completed on (mo/day/yr) **12/2/05** under the business name of **Woofter Pump & Well** by (signature) _____

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.