

1	LOCATION OF WATER WELL:	Fraction SW 1/4 SE 1/4 NW 1/4 SE 1/4	Section Number 35	Township Number 30	Range Number 34
County: Haskell					

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

1 MW & 2 MS at Stanton

2	WATER WELL OWNER: Clint Stalker
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:	4	DEPTH OF WELL 205 ft
		WELL'S STATIC WATER LEVEL Dry 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 5 in. Was casing pulled? Yes No X If yes, how much	
Casing height above or below land surface 20 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 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? West How many feet? 1500	

FROM	TO	PLUGGING MATERIALS
205	6	Clay/Subsoil
6	3	Cement
3	-	Cut-off Casing & Backfill

RECEIVED

OCT 28 2004

BUREAU OF WATER

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3-29-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 4-19-04 This Water Well Record was completed on (mo/day/year) 3-29-04
by (signature) Southwest Air Mail	

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.