

**1 LOCATION OF WATER WELL:** Fraction NW 1/4 SW 1/4 SW 1/4 Section Number 3 Township Number 31 Range Number 28 E

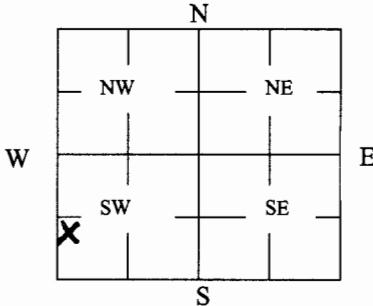
Distance and direction from nearest town or city street address of well if located within city?

5 miles North of Meade

**2 WATER WELL OWNER:** Clayton Stoltz Aus  
 RR#, St. Address, Box #: 11023 Y Rd  
 City, State ZIP Code: Meade, KS 67864

**Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: \_\_\_\_\_  
 Longitude: \_\_\_\_\_  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_

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



**4 DEPTH OF WELL** 115 ft.

WELL'S STATIC WATER LEVEL Dry ft

WELL WAS USED AS:

- |   |                            |                   |
|---|----------------------------|-------------------|
| <input checked="" type="radio"/> Domestic | 5 Public Water Supply      | 9 Dewatering      |
| 2 Irrigation                              | 6 Oil Field Water Supply   | 10 Monitoring     |
| 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

**5 TYPE OF BLANK CASING USED:**

<input checked="" type="radio"/> 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  If yes, how much \_\_\_\_\_  
 Casing height above or below land surface 36 in.

**6 GROUT PLUG MATERIAL:** 1 Neat cement 2 Cement grout  3 Bentonite 4 Other \_\_\_\_\_

Grout Plug Intervals: From 6 ft. to 3 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	<input checked="" type="radio"/> 4 Abandoned water well	Direction from well? <u>East</u>
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet? <u>500'</u>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>115</u>	<u>6</u>	<u>Clay / Subsoil</u>			
<u>6</u>	<u>3</u>	<u>Bentonite</u>			
<u>3</u>	<u>-</u>	<u>Cut-off casing &amp; Backfill</u>			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3-25-13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 805. This Water Well Record was completed on (mo/day/year) 3-25-13 under the business name of Southwest Windmill by (signature) David P...

**INSTRUCTIONS:** Use typewriter or ballpoint 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, 1000 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. Visit us at <http://www.kdheks.gov/geo/waterwells>.