

1 LOCATION OF WATER WELL: Fraction NW ¼ NW ¼ NE ¼ Section Number 2 Township Number 32 Range Number 28 W
 County: Meade
 Distance and direction from nearest town or city street address of well if located within city?
Madison and Fowler Streets Facility, Meade, KS

2 WATER WELL OWNER: Meade Cooperative Elevator & Supply – Randy Ackerman
 RR#, St. Address, Box #: PO BOX 220
 City, State, ZIP Code: MEADE, KS 67864
Global Positioning System (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 59.72 ft.
 WELL'S STATIC WATER LEVEL 41.29 ft.
 WELL WAS USED AS:
 1 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 X

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 2 in. Was casing pulled? Yes X No ___ If yes, how much 3 Feet
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: 1 Neat cement | 2 Cement grout | **3 Bentonite** | 4 Other _____
 Grout Plug Intervals: From 1 ft. to 59.72 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 | Direction from well?
 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | How many feet?

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Top soil			
3	59.72	Bentonite Grout			
					MW 2

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 01/15/2008 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 594. This Water Well Record was completed on (mo/day/year) 01/29/2008 under the business name of Coranco Great Plains, Inc. by (signature) *[Signature]*

INSTRUCTIONS: Please fill in blanks 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/waterwell>.