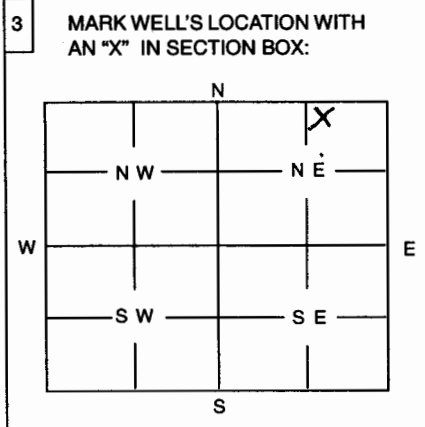


1 LOCATION OF WATER WELL: Fraction NE NE Section Number 28 Township Number 33 Range Number 33  
 County: Seward

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

2 WATER WELL OWNER: George Zirkle  
 RR #, St. Address, Box #: 834 S Cain Ave Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Liberal, KS 67901 Application Number: \_\_\_\_\_



4 DEPTH OF WELL ..... 250 ft  
 WELL'S STATIC WATER LEVEL ..... 225 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   
 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 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 ..... 28 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? ..... South      How many feet? ..... 1,500

FROM	TO	PLUGGING MATERIALS
250	225	Chlorinated Sand
225	10	Clay/gy soil
10	3	Bentonite
3	-	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) ..... 8-6-02 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 8-14-02 under the business name of Southwest Windmill This Water Well Record was completed on (mo/day/year) by (signature) ..... Dave L. Linn .....

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.