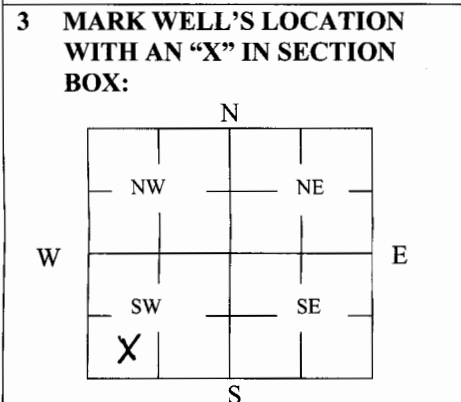


**1 LOCATION OF WATER WELL:** Fraction SW 1/4 1/4 1/4 Section Number 18 Township Number 3 Range Number 11 E/W  
 County: NEMHA  
 Distance and direction from nearest town or city street address of well if located within city?

**2 WATER WELL OWNER:** BRETT WIMBERLY **Global Positioning Systems** (decimal degrees, min. of 4 digits  
 RR#, St. Address, Box #: 1608 A ROAD Latitude: \_\_\_\_\_  
 City, State ZIP Code: VERMILLION, KS. 66544 Longitude: \_\_\_\_\_  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_



**4 DEPTH OF WELL** 38 ft.  
 WELL'S STATIC WATER LEVEL 34 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

**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      Rock  
 Blank casing diameter 40 in. Was casing pulled? Yes  No \_\_\_\_\_ If yes, how much 9 FT.  
 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 9 ft. to 6 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
<u>38</u>	<u>9</u>	<u>CHLORINATED SAND</u>			
<u>9</u>	<u>6</u>	<u>BENTONITE</u>			
<u>6</u>	<u>0</u>	<u>TOP SOIL</u>			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) \_\_\_\_\_ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \_\_\_\_\_. This Water Well Record was completed on (mo/day/year) 6-5-09 under the business name of Young Backhoe & Ditching, Inc by (signature) Pamela Young

**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>.