

1	LOCATION OF WATER WELL: County: Pottawatomie	Fraction SW $\frac{1}{4}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 22	Township Number 06	Range Number 12	E/W
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Distance and direction from nearest town or city street address of well if located within city?

From intersection of N. ST and Newman St. Havensville, KS 66432 525' N & 210' E

2	WATER WELL OWNER: RR #, St. Address, Box #: City, State, ZIP Code	Maye Y. Wegner 685 Newman St. Havensville, KS 66432	Board of Agriculture, Division of Water Resources Application Number:
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 12' ft. WELL'S STATIC WATER LEVEL 9' ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 4 Industrial </div> <div> <input type="checkbox"/> 5 Public Water Supply <input type="checkbox"/> 6 Oil Field Water Supply <input type="checkbox"/> 7 Domestic (Lawn & Garden) <input type="checkbox"/> 8 Air Conditioning </div> <div> <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 10 Monitoring Well <input type="checkbox"/> 11 Injection Well <input type="checkbox"/> 12 Other </div> </div>
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N

NW		NE
W	X	E
SW		SE
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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:
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1 Steel
 2 PVC

3 RMP (SR)
 4 ABS

5 Wrought
 6 Asbestos-Cement

7 Fiberglass
 8 Concrete Tile

9 Other (Specify below)

Blank casing diameter in. Was casing pulled? Yes No If yes, how much
 Casing height above or below land surface in.

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
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Grout Plug Intervals: From **4.5'** ft. to **5.0'** ft., From ft. to ft., From to ft.

What is the nearest source of possible contamination:

1 Septic tank
 2 Sewer lines
 3 Watertight sewer lines
 4 Lateral lines
 5 Cess pool

6 Seepage pit
 7 Pit privy
 8 Sewage lagoon
 9 Feedyard
 10 Livestock pens

11 Fuel storage
 12 Fertilizer storage
 13 Insecticide storage
 14 Abandoned water well
 15 Oil well/Gas well

16 Other (specify below)
Ag field

Direction from well? **10'** South How many feet? **10'**

FROM	TO	PLUGGING MATERIALS
12'	9'	Clean fill sand
9'	5'	Rock & clean soil
5'	4.5'	Sodium Bentonite
4.5'	+1.0	Clean soil

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 05/29/2009 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 06/02/2009 under the business name of Pottawatomie Co. Environmental Health Dept. This Water Well Record was completed on (mo/day/year) 06/02/2009 by (signature) Scott Schwinn R.S. County Sanitarian
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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, 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.