

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<u>Cloud</u>	<u>NE 1/4 SE 1/4 NW 1/4</u>	<u>28</u>	<u>6</u>	<u>3</u> EW

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

South on Hwy 35 3 miles Turn on Then South 144 RD. 1/2 mile

2	WATER WELL OWNER: <u>Susan Martin</u>	Board of Agriculture, Division of Water Resources
	RR #, St. Address, Box #: <u>1371 North 144th RD</u>	Application Number:
	City, State, ZIP Code: <u>Concordia KS. 66901</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>86'</u> ft.
			WELL'S STATIC WATER LEVEL <u>61'</u> ft.
			WELL WAS USED AS:
			☒ 1 Domestic ☐ 2 Irrigation ☐ 3 Feedlot ☐ 4 Industrial ☐ 5 Public Water Supply ☐ 6 Oil Field Water Supply ☐ 7 Domestic (Lawn & Garden) ☐ 8 Air Conditioning ☐ 9 Dewatering ☐ 10 Monitoring Well ☐ 11 Injection Well ☐ 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 <u>5</u> in. Was casing pulled? Yes No If yes, how much
	Casing height above or below land surface <u>2' above</u> in.

6	GROUT PLUG MATERIAL: ☐ 1 Neat cement ☒ 2 Cement grout ☐ 3 Bentonite ☐ 4 Other Grout Plug Intervals: From <u>18</u> ft. to <u>top</u> ft., From ft. to ft., From ft. 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? <u>North</u> How many feet? <u>140</u>

FROM	TO	PLUGGING MATERIALS
<u>86'</u>	<u>59'</u>	<u>Disinfected Gravel fill</u>
<u>59'</u>	<u>18'</u>	<u>Compacted Clay -</u>
<u>18'</u>	<u>top</u>	<u>Cement Grout</u>

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>8-6-09</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>09-0492</u> This Water Well Record was completed on (mo/day/year) <u>8-6-09</u> under the business name of <u>Joe P. H. & Electra</u> by (signature) <u>Joe P. H.</u>
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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.