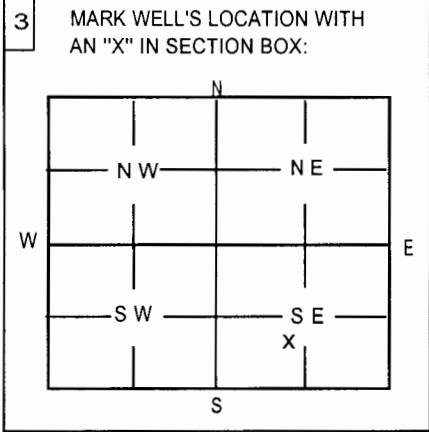


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Rooks	NE 1/4 SW 1/4 SE 1/4	21	T 7 S	R 18 E (W)

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

2 3/4 miles west of Stockton

2	WATER WELL OWNER: City of Plainville c/o City Clerk RR#, St. Address, Box # 222 W. Mill City, State, ZIP Code Plainville, KS 67663	Board of Agriculture, Division of Water Resources Application Number:
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4	DEPTH OF WELL 34.30 ft	
	WELL'S STATIC WATER LEVEL 28.00 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 <input checked="" type="checkbox"/>		
If yes, mo/day/yr sample was submitted _____		
Water Well Disinfected: Yes <input checked="" type="checkbox"/> 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 12 in.	Was casing pulled? Yes _____ No <input checked="" type="checkbox"/>
Casing height above or below land surface	22 in. If yes, how much _____

6	GROUT PLUG MATERIAL: 1 Neat Cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug
	Grout Plug Intervals: From 25.2 ft. to 0 ft., From _____ ft. to _____ ft. From 28 ft. to 25.2 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 None known
4 Lateral lines	9 Feedyard 14 Abandoned water well
5 Cess Pool	10 Livestock pens 15 Oil well/Gas well
Direction from well?	How many feet? _____

FROM	TO	PLUGGING MATERIALS
34.3	28	Chlorinated Sand
28	25.2	Bentonite Holeplug
25.2	0	Neat Cement

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-19-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 771 This Water Well Record was completed on (mo/day/year) _____ under the business name of Clarke Well & Equipment, Inc. by (signature) <i>R. C.</i>
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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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.