

Contact 1128-12-02

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|---|-------------------------|-----------------------|----------------|-----------------|--|
| 1 | LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| | County: Rooks | SW ¼ SW ¼ SE ¼ | 13 | 7 | 18 EW |

Distance and direction from nearest town or city street address of well if located within city?
304 Main Street, Stockton, KS

| | | |
|---|--|--|
| 2 | WATER WELL OWNER: KDHE-BER | Board of Agriculture, Division of Water Resources Application Number: |
| | RR #, St. Address, Box #: City, State, ZIP Code : T&M Topeka, KS | |

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| 3 | MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 | DEPTH OF WELL 40 ft. |
| | | WELL'S STATIC WATER LEVEL 27.3 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 IW-1 |
| 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 No <input checked="" type="checkbox"/> | | | |

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| 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 2 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No If yes, how much 3' |
| | Casing height above or below land surface 36 in. |

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| 6 | GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other |
| | Grout Plug Intervals: From 0.5 ft. to 40 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? How many feet? |

| FROM | TO | PLUGGING MATERIALS |
|------|-----|--------------------|
| 0 | 0.5 | concrete |
| 0.5 | 40 | Bentonite |
| | | |
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| 7 | CONTRACTOR'S OF 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. 554 / 783 This Water Well Record was completed on (mo/day/year) 11-19-08 under the business name of Wooffer Pump & Well by (signature) <i>[Signature]</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 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.