KSA 82a-1212

ID NO.

Township Number Range Number Section Number Fraction LOCATION OF WATER WELL: 8 23 E/W NE NE 14 NE 14 14 County: Graham Distance and direction from nearest town or city street address of well if located within city? 405 W Main Street 2 WATER WELL OWNER: Bobbie Bell 405 W Main Street Board of Agriculture, Division of Water Resources RR #, St. Address, Box #: OW-1Hill City, KS 67642 Application Number: City, State, ZIP Code DEPTH OF WELL 49.82 ft. 3 MARK WELL'S LOCATION WITH WELL'S STATIC WATER LEVEL 42.31 ft. AN "X" IN SECTION BOX: X WELL WAS USED AS: 9 Dewatering 1 Domestic 5 Public Water Supply NW NE OW-1 Monitoring Well 6 Oil Field Water Supply 2 Irrigation 7 Domestic (Lawn & Garden) 11 Injection Well 3 Feedlot 12 Other ..... 8 Air Conditioning W 4 Industrial SW SE If yes, mo/day/yr sample was submitted ..... Water Well Disinfected: Yes ...... No ...... TYPE OF BLANK CASING USED: 5 9 Other (Specify below) 3 RMP (SR) 5 Wrought 7 Fiberglass 1 Steel 8 Concrete Tile 2)PVC 4 ABS 6 Asbestos-Cement ..... If yes, how much 48 Blank casing diameter ....2. Yes ....X .... in. Was casing pulled? No ..... Casing height above or below land surface ......48...... in. **3**Bentonite 2 Cement grout 4 Other..... GROUT PLUG MATERIAL: 1 Neat cement to 49.82ft From 1.5 ft. From ...... ft. to ..... ft., From ..... to ..... ft. Grout Plug Intervals: What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit TDFuel storage 16 Other (specify below) 7 Pit privy 12 Fertilizer storage 2 Sewer lines ..... 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? North How many feet? .....4 **FROM** TO PLUGGING MATERIALS 0 1.5 Concrete 1.5 49.82 Volclay Bentonite Grout CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 08-16-05 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) under the business name of MILCO, Environmental Services, Inc. by (signature) 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.