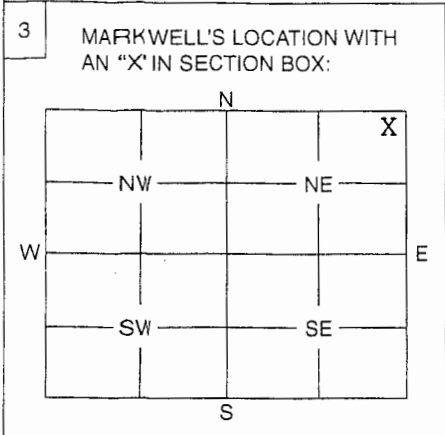


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Graham	NE 1/4 NE 1/4 NE 1/4	13	8	23	E 1/4

Distance and direction from nearest town or city street address of well if located within city?
East Highway 24, Hill City

2	WATER WELL OWNER: Doris Lovelady	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #: RR 2, Box 201	City, State, ZIP Code: Hill City, KS 67642	Application Number:



4 DEPTH OF WELL **25** ft.

WELL'S STATIC WATER LEVEL **21.30** ft. **BTOC**

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 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 **X**.....

If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No **X**.....

5 TYPE OF BLANK CASING USED:

<input type="radio"/> 1 Steel	<input type="radio"/> 3 RMP (SR)	<input type="radio"/> 5 Wrought	<input type="radio"/> 7 Fiberglass	<input type="radio"/> 9 Other (Specify below)
<input checked="" type="radio"/> 2 PVC	<input type="radio"/> 4 ABS	<input type="radio"/> 6 Asbestos-Cement	<input type="radio"/> 8 Concrete Tile	

Blank casing diameter **2** in. Was casing pulled? Yes **X**..... No If yes, how much **25'**.....

Casing height above or below land surface **n/a** in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other **Concrete**

Grout Plug Intervals: From **0** ft. to **1** ft., From **1** ft. to **25** ft., From to ft.

What is the nearest source of possible contamination:

<input type="radio"/> 1 Septic tank	<input type="radio"/> 6 Seepage pit	<input checked="" type="radio"/> 11 Fuel storage	<input type="radio"/> 16 Other (specify below)
<input type="radio"/> 2 Sewer lines	<input type="radio"/> 7 Pit privy	<input type="radio"/> 12 Fertilizer storage	
<input type="radio"/> 3 Watertight sewer lines	<input type="radio"/> 8 Sewage lagoon	<input type="radio"/> 13 Insecticide storage	
<input type="radio"/> 4 Lateral lines	<input type="radio"/> 9 Feedyard	<input type="radio"/> 14 Abandoned water well	
<input type="radio"/> 5 Cess pool	<input type="radio"/> 10 Livestock pens	<input type="radio"/> 15 Oil well/Gas well	

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
0	1	Concrete
1	20	Bentonite (8")
20	25	Bentonite (2")

MW2

GeoCore #832

KDHE #U6 033 00625

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **1-5-2006** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/year) **1-9-2006** under the business name of **GeoCore Inc.**

by (signature) *[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.