

1 LOCATION OF WATER WELL:	Fraction NW ¼ SW ¼ SW ¼	Section Number 20	Township Number 8	Range Number 36																																				
County: Thomas																																								
Distance and direction from nearest town or city street address of well if located within city?																																								
2 WATER WELL OWNER: BREWSTER APCO																																								
RR#, St. Address, Box #		Board of Agriculture, Division of Water Resources																																						
City, State, ZIP Code : BREWSTER, KS 67732		Application Number:																																						
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 150.2 ft.																																						
<div style="text-align: center;">N W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td></td><td></td><td></td></tr><tr><td>NW</td><td></td><td>NE</td></tr><tr><td>SW</td><td>X</td><td>SE</td></tr></table>					NW		NE	SW	X	SE	WELL'S STATIC WATER LEVEL 74.11 ft.																													
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WELL WAS USED AS:																																								
<table style="width:100%;"><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td><input checked="" type="checkbox"/> 10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden (domestic)</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other</td></tr></table>			1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="checkbox"/> 10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other																										
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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"/>																																								
5 TYPE OF BLANK CASING USED:																																								
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Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much DRILLED OUT TOP 5 FT																																								
Casing height above or below land surface 0 in.																																								
6 GROUT PLUG MATERIAL: <table style="display: inline-table; vertical-align: top;"><tr><td>1 Neat cement</td><td>2 Cement grout</td><td>3 Bentonite</td><td>4 Other</td></tr></table>					1 Neat cement	2 Cement grout	3 Bentonite	4 Other																																
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Grout Plug Intervals From 150.2 ft. to 74.11 ft. From 74.11 ft. to 0 ft. From ft. to ft.																																								
What is the nearest source of possible contamination:																																								
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Direction from well? How many feet?																																								
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 12-30-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 2-3-06 under the business name of Woofter Pump & Well Inc. by (signature) <i>Jay G. Woofter</i>																																								
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																								