

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: <u>SHERMAN</u>	<u>NE 1/4 SW 1/4 SE 1/4</u>	<u>22</u>	<u>8</u>	<u>38</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">EW</span>																								
Distance and direction from nearest town or city street address of well if located within city? <u>HIWAY 24 EDSON KS</u>																													
2	WATER WELL OWNER: <u>KOCH INDUSTRIES</u>																												
RR #, St. Address, Box #:		Board of Agriculture, Division of Water Resources																											
City, State, ZIP Code:		Application Number:																											
<u>4111 EAST 37TH ST N</u>		<u>WICHITA KS 67720</u>																											
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:																												
<div style="display: flex; align-items: center;"><div style="text-align: center; margin-right: 20px;"><p>N</p><table border="1" style="border-collapse: collapse; width: 150px; height: 150px;"><tr><td style="width: 50px; height: 50px;">NW</td><td style="width: 50px; height: 50px;">NE</td></tr><tr><td style="width: 50px; height: 50px;">SW</td><td style="width: 50px; height: 50px;">SE</td></tr></table><p>W <span style="margin-left: 100px;">E</span></p><p>S</p></div><div><p>DEPTH OF WELL <u>174.84</u> ft.</p><p>WELL'S STATIC WATER LEVEL <u>168.26</u> ft.</p><p>WELL WAS USED AS:</p><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><span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10 Monitoring Well</span> <u>MW-6</u></td></tr><tr><td>3 Feedlot</td><td>7 Domestic (Lawn &amp; Garden)</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other</td></tr></table><p>Was a chemical / bacteriological sample submitted to Department? Yes ..... No <span style="margin-left: 20px;"><u>X</u></span></p><p>If yes, mo/day/yr sample was submitted .....</p><p>Water Well Disinfected: Yes ..... No <span style="margin-left: 20px;"><u>✓</u></span></p></div></div>						NW	NE	SW	SE	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10 Monitoring Well</span> <u>MW-6</u>	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other								
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5	TYPE OF BLANK CASING USED:																												
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6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3 Bentonite</span> 4 Other .....																												
Grout Plug Intervals: From <u>3</u> ft. to <u>174.84</u> ft., From ..... ft. to ..... ft., From ..... to ..... ft.																													
What is the nearest source of possible contamination:																													
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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) <u>10-13-06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>735</u> This Water Well Record was completed on (mo/day/year) <u>10-16-06</u> under the business name of <u>MILCO ENVIRONMENTAL SERVICES INC</u> by (signature) <u>[Signature]</u>																												

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.