

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Thomas	NE 1/4 SW 1/4 SW 1/4	2	9S	35 EW

Distance and direction from nearest town or city street address of well if located within city?

2	WATER WELL OWNER: Barrett Survivor Trust
RR #, St. Address, Box #:	1070 West 3rd
City, State, ZIP Code:	Colby KS 67701
	Board of Agriculture, Division of Water Resources Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 208 ft.
		WELL'S STATIC WATER LEVEL 170 ft.	
		WELL WAS USED AS:	
		<input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 5 Public Water Supply <input type="checkbox"/> 6 Oil Field Water Supply <input type="checkbox"/> 7 Domestic (Lawn & Garden) <input type="checkbox"/> 8 Air Conditioning <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 10 Monitoring Well <input type="checkbox"/> 11 Injection Well <input type="checkbox"/> 12 Other	
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 <input checked="" type="checkbox"/> No			

5	TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <input checked="" type="checkbox"/> 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile	
Blank casing diameter 5" in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much	
Casing height above or below land surface 72" in.	

6	GROUT PLUG MATERIAL:	1 Neat cement	<input checked="" type="checkbox"/> 2 Cement grout	<input checked="" type="checkbox"/> 3 Bentonite	4 Other
Grout Plug Intervals:		From 165 ft. to 7 ft.	From 7 ft. to 6 ft.	From	to
What is the nearest source of possible contamination:		Bentonite	Cement Grout Corp.		
1 Septic tank 6 Seepage pit 11 Fuel storage 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		<input checked="" type="checkbox"/> 16 Other (specify below) Capped water line (Fresh)			
Direction from well? NE		How many feet? 6'			

FROM	TO	PLUGGING MATERIALS
208	165	Washed Sand
165	7	Bentonite
7	6	Cement Grout Corp.
6	0	Compacted Clay + Topsoil

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6-5-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 663 This Water Well Record was completed on (mo/day/year) 6-13-07 under the business name of Brenn Pump & Supply by (signature) Dan
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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.