

## CERTIFICATE OF SERVICE

On this **5th** day of **September, 2017**, I hereby certify that the attached Approval of Application for Change in Point of Diversion for Water Right, File No. **6233, 9337 & 15773** dated **September 5, 2017** was hand delivered to the following:

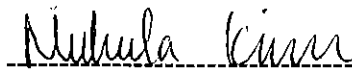
C R Bert

A copy of the Approval of Application for Change in Point of Diversion was provided electronically to:

Water Rights Section-Manhattan, KS

A copy of the Approval of Application for Change in Point of Diversion was sent via electronic mail:

Big Bend Groundwater Management District No. 5

  
-----  
Staff

Submit completed application to:  
 Kansas Department of Agriculture  
 Division of Water Resources  
 Field Office for your area.  
 Call for address:  
 Topeka -- (785) 296-5733  
 Stafford -- (620) 234-5311  
 Stockton -- (785) 425-6787  
 Garden City -- (620) 276-2901  
<http://agriculture.ks.gov/dwr>

**DWR FIELD OFFICE  
 APPLICATION FOR APPROVAL  
 TO CHANGE THE PLACE OF  
 USE AND/OR THE  
 POINT OF DIVERSION  
 WATER METER REQUIRED**



**STATE OF KANSAS**

Filing Fee Must Accompany the Application, K.S.A. 82a-708b(b), as amended.  
 Fee Schedule is on the third page of this application form.

Paragraph Nos. 1, 2, 3 & 5 must be completed. Complete all other applicable portions. If change in point of diversion is greater than 100 feet, or if place of use will be changed, include a topographic map or detailed plat showing the authorized and proposed point(s) of diversion and/or place of use.

File No. 15773

RECEIVED  
 SEP 05 2017  
 11:22am  
 Stafford Field Office  
 DIVISION OF WATER RESOURCES

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both):

Place of Use                       Point of Diversion

under the water right which is the subject of this application in accordance with the conditions described below.

The source of supply is:                       Groundwater                       Surface water

2. Name and address of Applicant: C R Bert

PO Box 130, Larned KS 67550-0130

Phone Number: (620)285-7777                      Email address: \_\_\_\_\_

Name and address of Water Use Correspondent: Ash Valley LLC

C R Bert, PO Box 130, Larned KS 67550-0130

Phone Number: (620)285-7777                      Email address: \_\_\_\_\_

3. The presently authorized place of use is:

Owner of Land ---- NAME: Ash Valley LLC

ADDRESS: C R Bert, PO Box 130, Larned KS 67550-0130

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
No	Change																		

4. If this application is for a change in place of use, it is proposed that the place of use be changed to:

Owner of Land ---- NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	

**For Office Use Only:** Code \_\_\_\_\_ Fee \$ 100 TR # \_\_\_\_\_ Receipt Date \_\_\_\_\_ Check # 1237

14. If the proposed groundwater point of diversion is 300 or fewer feet from existing point of diversion, complete the following:
- (a) Does the undersigned represent all owners of the currently authorized place(s) of use identified in this application?  
 Yes     No    (If no, all owners must sign this application.)
  - (b) Will the ownership interest of any owner of the currently authorized place(s) of use identified in this application be adversely affected if this application is approved as requested?  
 Yes     No    (If yes, all owners must sign this application.)
  - (c) If this application is not approved expeditiously, will there be substantial damage to property, public health or safety?  
 Yes     No    (If no, all owners must sign this application.)

If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized statement authorizing representation).

I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regards to the water right(s) to which this application pertains. I further verify that the statements contained in this application are true, correct and complete.


Dated at Stafford, Kansas, this 5th day of September, 2017.

<p><u>X By CR Bert</u>          _____          (Owner)</p> <p><u>C.R. BERT, Member Ash Valley, LLC</u>          _____          (Please Print)</p>	<p>_____          (Spouse)</p> <p>_____          (Please Print)</p>
<p>_____          (Owner)</p> <p>_____          (Please Print)</p>	<p>_____          (Spouse)</p> <p>_____          (Please Print)</p>
<p>_____          (Owner)</p> <p>_____          (Please Print)</p>	<p>_____          (Spouse)</p> <p>_____          (Please Print)</p>

State of Kansas }  
 County of Stafford } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 5<sup>th</sup> day of September, 2017 by CR Bert, Member Ash Valley LLC

My Commission Expires \_\_\_\_\_



\_\_\_\_\_  
 Notary Public

**ONLY COMPLETE APPLICATIONS WILL BE PROCESSED.** To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate fee must be paid.

**FEE SCHEDULE**

Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (1) Application to change a point of diversion 300 feet or less ..... \$100
- (2) Application to change a point of diversion more than 300 feet ..... \$200
- (3) Application to change the place of use ..... \$200



**SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPOSING CONDITIONS**

This Summary Order is issued under authority of K.S.A. 82a-708b, as amended, and K.A.R. 5-5-1, *et seq.* and other applicable provisions of the *Kansas Water Appropriation Law, K.S.A. 82a-701 et. seq.*, and rules and regulations promulgated thereunder, With the exception of those conditions expressly contained herein, this Summary Order does not change the terms, conditions and limitations of File No. 15773.

1. A change application was received on September 5, 2017 requesting that the place of use and / or point of diversion authorized under the above-referenced file number be changed as described in the application.
2. On and after the effective date of this summary order, the authorized place(s) of use shall be located substantially as shown on the topographic map accompanying the application to change the place of use.  Applicable  Not Applicable
3. The change in point of diversion shall not impair existing rights and shall be limited to the same source or sources of water as previously authorized. The point of diversion authorized by this summary order shall be located within a 50 foot radius of the authorized point(s) of diversion.  Applicable  Not Applicable
4. The point(s) of diversion authorized herein shall not actually be located more than 90 feet from the previously authorized point(s) of diversion.  Applicable  Not Applicable
5. As required by K.A.R. 5-3-5d, if the works for diversion is a well with a diversion rate of 100 gallons per minute or more, a tube or other device suitable for making water level measurements shall be installed, operated and maintained in accordance with K.A.R. 5-6-13.  Applicable  Not Applicable
6. **The owner of the authorized place(s) of use shall properly install an acceptable water flow meter on or before December 31, 2017**, or before the first use of water, whichever occurs first. The water flow meter shall be installed, operated and maintained in accordance with K.A.R. 5-1-4 through 5-1-12. As required by K.S.A. 82a-732, as amended, and K.A.R. 5-3-5e, the owner shall maintain records and report the reading of the water flow meter and the total quantity of water diverted annually to the Chief Engineer by March 1 following the end of each calendar year.  
 Applicable  Not Applicable
7. **Installation of the works for diversion of water shall be completed on or before December 31, 2017**, or within any authorized extension of time. By March 1, 2018 the applicant shall notify the Chief Engineer that construction of the works for diversion has been completed, on the form provided by the Chief Engineer, as required by K.A.R. 5-8-4e.  
 Applicable  Not Applicable
8. **The completed well log shall be submitted with the required notice.**  Applicable  Not Applicable
9. All diversion works into which any type of chemical or other foreign substance will be injected into the water shall be equipped with an in-line, automatic, quick-closing check valve capable of preventing pollution of the source of the water supply. The check valve(s) shall be installed, operated and maintained in accordance with K.A.R. 5-3-5c.  Applicable  Not Applicable
10. Additional Conditions are attached.  Yes  No
11. In accordance with K.S.A. 82a-708a, as amended, and K.A.R. 5-5-14, all of the owners of the authorized place(s) of use of water appropriated under the above-referenced file number are responsible for compliance with its terms, conditions and limitations, as amended and/or supplemented by this Summary Order, and with applicable provisions of the *Kansas Water Appropriation Law* and the *Rules and Regulations* promulgated thereunder. Failure to comply with these provisions may result in civil penalties pursuant to K.S.A. 82a-737, as amended, and/or the suspension or revocation and dismissal of the water or appropriation right or any other enforcement actions authorized by law.

**Administrative Appeal and Effective Date of Order**

If you are aggrieved by this order, pursuant to K.S.A. 82a-1901, you may request an evidentiary hearing before the Chief Engineer or request administrative review by the Secretary of Agriculture. A request for hearing by the Chief Engineer must be filed within **15 days** of service of this Order and a request for administrative review by the Secretary must be filed within **30 days** pursuant to K.S.A. 77-531. Any request for administrative review must state a basis for review pursuant to K.S.A. 77-527. File any request with **Kansas Department of Agriculture, Legal Division, 1320 Research Park Drive, Manhattan, KS 66502**. Failure to timely request a hearing or review may preclude review under the Kansas Judicial Review Act.

*For Use by Register of Deeds*

FOR OFFICE USE ONLY  
**APPLICATION APPROVED AND SUMMARY ORDER ISSUED**

By: Jeff Lanterman  
Duly Authorized Designee of the Chief Engineer

(Print Name): Jeff Lanterman  
Division of Water Resources - Kansas Department of Agriculture

Date of Issuance: 9/5/17

State of Kansas )

County of Stafford ) SS

Acknowledged before me on 9/5/17

by Jeff Lanterman

Signature: Michela Kirm  
Notary Public



My commission expires:

(Notary Seal)

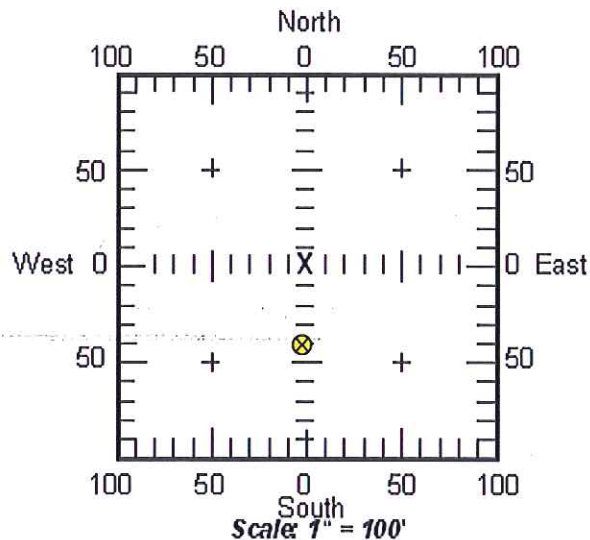


5. **Presently authorized point of diversion:**  
 One in the SE Quarter of the SW Quarter of the SE Quarter of Section 10, Township 21 South, Range 16 W, in Pawnee County, Kansas, 545 feet North 1,600 feet West of Southeast corner of section. Authorized Rate 396 gpm (limited) Authorized Quantity 29 AF Depth of well 69 (feet)  
**(DWR use only: Computer ID No. 3 GPS N/A feet North N/A feet West)**  
 This point will not be changed  This point will be changed as follows:  No change, point better described with GPS as follows:  
**Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)**  
 One in the SE Quarter of the SW Quarter of the SE Quarter of Section 10, Township 21 South, Range 16 W, in Pawnee County, Kansas, 505 feet North 1,600 feet West of Southeast corner of section. Proposed Rate no change Proposed Quantity no change Proposed well depth (feet) ~80.  
 This point is:  Additional Well  Geo Center List other water rights that will use this point 6233 & 9337.

6. **Presently authorized point of diversion:**  
 One in the --- Quarter of the CS SE Quarter of the SE Quarter of Section 10, Township 21 South, Range 16 W, in Pawnee County, Kansas, 60 feet North 535 feet West of Southeast corner of section. Authorized Rate 425 gpm (limited) Authorized Quantity 31 AF Depth of well 85 (feet)  
**(DWR use only: Computer ID No. 5 GPS 63 feet North 514 feet West)**  
 This point will not be changed  This point will be changed as follows:  No change, point better described with GPS as follows:  
**Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)**  
 One in the \_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of Section \_\_\_\_\_, Township \_\_\_\_\_ South, Range \_\_\_\_\_ (E/W), in \_\_\_\_\_ County, Kansas, \_\_\_\_\_ feet North \_\_\_\_\_ feet West of Southeast corner of section. Proposed Rate \_\_\_\_\_ Proposed Quantity \_\_\_\_\_ Proposed well depth (feet) \_\_\_\_\_.  
 This point is:  Additional Well  Geo Center List other water rights that will use this point 9337.

7. The changes herein are desired for the following reasons?  
 (please be specific) The current well is failing and needs replaced.

13a. If the proposed point of diversion will be relocated within 100 feet of the existing point of diversion, indicate its location on the diagram below in relation to the existing point of diversion. (PLEASE NOTE: The "X" in center of diagram below represents presently authorized point of diversion.)



8. If a well, is the test hole log attached?  Yes  No

9. The change(s) (was)(will be) completed by?  
ASAP

10. If the point of diversion is a well:  
 (a) What are you going to do with the old well?  
keep for domestic  
 (b) When will this be done? when new well drilled

11. Groundwater Management District recommendation attached?  Yes  No

12. Assisted by EKF // SFFO

13b. If the proposed point of diversion will be relocated more than 100 feet but within 1320 feet from the existing point of diversion, attach a topographic map or aerial photograph. For groundwater sources, show all wells (including domestic) within one-half mile of the proposed point of diversion and the names and mailing addresses of the owners. For surface water sources, show the names and addresses of the landowner(s) one-half mile downstream and one-half mile upstream from your property lines.

# CHECK SHEET Short Change

(To be completed and attached to each application)

File No. 15773

Field Office No. 2

GMD No. 5

1. **Plugging agreement obtained for GMD?** Yes  No  Non Applicable
2. **Is Landowner correct as currently shown in WRIS?** Yes  No  **Address Change?** NO  
If applicable, list Place of Use Overlap File Nos. 6233 & 9337
3. **Is Water Use Correspondent correct as currently shown in WRIS?** Yes  No  **Address Change?** NO  
Name of Former WUC --- Name of New WUC ---
4. a. **Point of diversion computer ID No(s).** 3 **for point(s) being changed.**

b. **Show feet distances from the** SE **corner of the section for the new point(s) of diversion:**

Action	PDIV ID	Geo Ctr?	Sec	Twp	Rng	'N	'W	County	Qualifiers
ENT		N/A	10	21	16W	505	1600	Pawnee	SE SW SE
DEL	15469	N/A	10	21	16W	545	1600	Pawnee	SE SW SE
NO CHG	80670	N/A	10	21	16W	60	535	Pawnee	CS SE SE

c. **If multiple points of diversion exist and rates and quantities are individually assigned, show:**

Old PDIV ID	Authorized Rate	Additional Rate	Authorized Quantity	Additional Quantity
<u>15469</u>	<u>396</u> gpm	<u>0</u> gpm	<u>29</u> af	<u>29</u> af
<u>80670</u>	<u>425</u> gpm	<u>0</u> gpm	<u>31</u> af	<u>31</u> af
<u>---</u>	<u>---</u> gpm/cfs	<u>---</u> gpm/cfs	<u>---</u> af/mgy	<u>---</u> af/mgy

d. **Name of Drainage Basin** Arkansas River **Is this correctly shown in WRIS?**  Yes  No

e. **Formation Name & No.** Tributary Alluvium 112 **Special Use Area** N/A

5. **Distances from the previous p/d:** 40 ' S --- ' E / W

**6. WATER RIGHT ACTION TRAIL COMMENTS**

9/5/17 Change Application Received (date accepted for priority)  
9/5/17 Change Approved  
12/31/17 Notice and Proof by  
--- / --- / --- Completion Requirement Removed (Change No. C---).

**7. METER ACTION TRAIL COMMENTS**

9/5/17 DWR Meter Required by 12/31/17  
--- / --- / --- Anti-Reverse Meter Required by  
--- / --- / --- Meter Seal Required by

8. Base Acres not determined Year --- Minimum Reasonable Quantity ---

Date Created **9/5/17** by **EKF**  
 Date Entered by

**CHECK SHEET ATTACHMENT**

9. Changes to the place of use will be:

File Number 15773

Action	Owner Person ID	Place Use ID #	Sec.	Twp.	Range		NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
							NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
NO CHG	56973	8028	10	21	16W	Acres Authorized																	
						New Acres																	
						Acres Authorized																	
						New Acres																	
						Acres Authorized																	
						New Acres																	
						Acres Authorized																	
						New Acres																	

Names and Address:

1. Person ID # <u>56973</u> Ash Valley LLC C R Bert PO Box 130 Larned KS 67550-0130	2. Person ID # _____ _____ _____ _____ _____	3. Person ID # _____ _____ _____ _____ _____
---	--	--

**GENERAL INSTRUCTIONS**

- |  |   |   |
|--|---|---|
| 1. Give to Applicant:<br>a. <u>Original</u> application/approval<br>b. Original receipt (one for <u>each</u> application)<br>c. Information packet containing:<br><ul style="list-style-type: none"> <li>• Notice and Proof form</li> <li>• Water Meter Specifications</li> <li>• Acceptable Meter list</li> <li>• Water level measurement tube specifications</li> <li>• Check Valve specifications</li> <li>• Pink Sheet - K.S.A. 82a-728 letter</li> <li>• Form stating to record in Register of Deeds Office (OPTIONAL AS NEEDED)</li> </ul> | 2. Send to headquarters:<br>a. Good, <b>scannable</b> copy of application and/or approval and this check sheet<br>b. Original check and copy of receipt<br>c. Test hole log<br>d. GMD recommendation, if any<br>e. Map or aerial photograph, if any<br>3. Send to KDHE: Letter (KDHE.LT) advising of location of abandoned well. <input type="checkbox"/> | 4. Date stamp received and approved.<br>5. Complete ownership and WUC change information. |
|--|---|---|

ADDITIONAL PHOTOCOPIES

HQ \_\_\_\_\_

GMD5 \_\_\_\_\_

Driller \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CONDITIONS

1. Insert notice and proof date.
2. Type or print applicant's/owner's name on line.
3. Complete notary statement.

### DRILLER'S TEST LOG

Customer Name: Bert & Wetta Date: 8/31/2017  
 Address \_\_\_\_\_ Test No: #1-17  
 County: Pawnee Quarter: SE Section: 10 Township: 21 Range: 16

Drilled Footage		Description of Strata	Indicate Test Location by an X											
From	To													
0	3	Top soil												
3	22	Brown clay												
22	47	Sand & gravel- med to pea size coarse clean												
47	50	Tan clay												
50	60	Sand & gravel- small med w/ very small clay streaks												
60	65	Gravel- small med w/ heavy white clay caliche broken rock & ironated rock												
65	75	Brown clay & tan clay												
75	80	Sand & gravel- small med clean coarse												
80	102	Tan clay w/ caliche										X		
102	116	Tan clay & gray clay	Static Water Level: _____ Ft											
116	125	Dakota drift w/ tan clay	Remarks: <u>Plugged test hole</u>											
125	130	Sand rock												
			Garmin GPS- Nad 83											
			Latitude: 38.2332 N											
			Longitude: 99.0650 W											
			Elevation: _____											
			Driller: <u>Luis Luna</u>											
			Spot Location: <u>SE/ SW/ SE</u>											

ROSENCRANTZ-BEMIS EQUIPMENT CO., INC  
 Telephone (620) 792-2488 or (620) 793-5512  
 P.O. Box 713, Great Bend, KS 67530

RECEIVED  
 SEP 05 2017  
 Starford Field Office  
 Division of Water Resources



## FAX COVER SHEET

ROSENCRANTZ- BEMIS ENT. INC.

P.O. Box 713

1115 281 By- Pass

Great Bend, Ks. 67530

620-793-5512

620-793-5176 Fax

R-Bwater@hotmail.com

<b>Send to:</b> Stafford Water Resources	<b>From:</b> Bobbie
<b>Attention:</b> Elizabeth	<b>Date:</b>
<b>Office location:</b>	<b>Office location:</b>
<b>Fax number:</b> 620-234-6900	<b>Phone number:</b> 620-792-2488

Urgent      Reply ASAP      Please comment      Please review      For your information

Total pages including cover: 2

Please see attached Test Log #1-17 on SE 10-21-16 for Bert & Wetta

Thank you, Bobbie

RECEIVED

SEP 05 2017

Stafford Field Office  
Division of Water Resources

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Pawnee</u>	<u>se 1/4 sw 1/4 se 1/4</u>	<u>10</u>	<u>T 21 S</u>	<u>R 16</u>

Distance and direction from nearest town or city street address of well if located within city?  
2 3/4 north 1 1/8 east of Larned, Ks.

2 WATER WELL OWNER: Ed Boyd  
 RR#, St. Address, Box # : Rt. 1  
 City, State, ZIP Code : Larned, Ks. 67550  
 Board of Agriculture, Division of Water Res  
 Application Number: 6233

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>62</u> ft. ELEVATION: _____
	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL <u>22</u> ft. below land surface measured on <u>mo/day/yr</u> <u>5-17-88</u> Pump test data: Well water was <u>.40</u> ft. after <u>1 1/2</u> hours pumping <u>.250</u> Est. Yield <u>.350</u> gpm: Well water was <u>.44</u> ft. after <u>2 1/2</u> hours pumping <u>.325</u> Bore Hole Diameter <u>29</u> in. to <u>62</u> ft., and _____ in. to _____ WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 <u>Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Observation well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample wt mitted Water Well Disinfected? Yes <u>hth</u> No _____

5 TYPE OF BLANK CASING USED:  
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) 10 Asbestos-cement  
 Blank casing diameter 16 in. to 42 ft., Dia. \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia. \_\_\_\_\_ in. to \_\_\_\_\_  
 Casing height above land surface 12 in., weight \_\_\_\_\_ SDR 32.5 lbs./ft. Wall thickness or gauge No. \_\_\_\_\_  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) \_\_\_\_\_ 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) \_\_\_\_\_ 11 None (open hole)  
 SCREEN-PERFORATED INTERVALS: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_  
 Grout Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) \_\_\_\_\_  
 Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Top soil			
4	28	Clay			
28	60	Gravel with clay streaks			
60	65	Clay with gravel			
65	69	Clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and completed on (mo/day/year) 5-25-88 and this record is true to the best of my knowledge and belief. K Water Well Contractor's License No. 134. This Water Well Record was completed on (mo/day/yr) 8-26-88 under the business name of Rosencrantz-Bemis by (signature) Fredia Hudson

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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send to WATER WELL OWNER and retain one for your records.