1 LOCATION OF WATER WELL:	SEPTIMENT SW. SW. SW. 14	Section Number	Township Number	Range Number	
		L	10	1 2	
Distance and direction from nearest town or city street address of well if located within city? 3 Miles East of Longford, KS, 3 Miles Novth, I mile west a ry Mile South.					
2 WATER WELL OWNER: Douglas Nelson, Cathy Smith RR#, St. Address, Box #: ROX345 City, State, ZIP Code: Dake Fresh & S67487 RR# St. Address Application Number:					
RR#, St. Address, Box #: ROX245 Board of Agriculture, Division of Water Resources					
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
WELL WAS USED AS:					
	N W N E 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Lawn and Garden Only 11 Injection Well				
w	E 4 Industrial	8 Air Conditioning			
Was a chemical/bacteriological sample submitted to Department? YesNo If yes, mo/day/yr sample was submitted					
Water Well Disinfected: Yes No					
S					
5 TYPE OF BLANK CASING USED: **					
(1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
Blank casing diameterin. Was casing pulled? Yes No If yes, how muchin.					
6 GROUT PLUG MATERIAL: 1 Neat cement (2)Cement grout 3 Bentonite 4 Other					
Grout Plug Intervals: Fromft. toft., Fromft. toft., From toft.					
What is the nearest source of possible contamination:					
Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)					
2 Sewer lines 7 Pit privy 12 Fertilizer storage					
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well					
Direction from well? How many foot? Out I mile					
FROM TO	PLUGGING MATERIALS	X (Casi	the 6" Casin	129	
0 4 Dirt		Inside	the G" Casing	5	
4 4 5011	Bentonite Clay				
1 1 1 1 1 1 1	Native Clay.				
	rete.				
	ve Clav				
34 45 Ser	,				
0 / 10					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3 Feb. 1.9.5 and this record is true to the best of my knowledge and belief. Kansas					

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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.