1 LOCATIO	ON OF WATER	R WELL:	Fraction	Section Number	Township Number	Range Number	
County: POTTAWATOMIE		NW 1/4 NE1/4 SW1/4	3	10S	10E		
Distance and direction from nearest town or city street address of well if located within city?							
18200 Highway 24 Station 623 + 31  2 WATER WELL OWNER: Donald M. Daily							
RR#, St. Address, Box #:  18200 Hiway 24  Board of Agriculture, Division of Water Resources							
City, State, ZIP Code: Warmego, KS 66547 Application Number:							
	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  N  WELL'S STATIC WATER LEVEL 34.67  ft.						
WELL WAS USED AS:							
W	X	N E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supply 6 Oil Field Water Supply 7 Lawn and Garden Only 8 Air Conditioning 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other			
s	Was a chemical/bacteriological sample submitted to Department? YesNo.X.  If yes, mo/day/yr sample was submitted						
Water Well Disinfected: YesX No							
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 diameter5in. Was casing pulled? Yes No.X If yes, how much							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From2.ft. to34.ft., Fromft. toft., From toft.							
What is the nearest source of possible contamination:							
2 Sewer lines 7 Pit privy 12 3 Watertight sewer lines 8 Sewage lagoon 13 4 Lateral lines 9 Feedyard 14				11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water of 15 Oil well/Gas wel	ge age well	ecify below)	
Direction from well? South How many feet?							
FROM	то	PLU	JGGING MATERIALS				
0	2	Top Soi	.1				
2	34	Hole Pl	ug				
34	53	Gravel		_			
				_			
				_			
				_			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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.