1 LOCATION OF WATER WELL:			Fraction SW	Section Number	Township Number	Range Number
County:	Riley		1/4 SW 1/4 ME 1/4	26	10	8 E
Distance and direction from nearest town or city street address of well if located within city? 3.5 miles west of Zeandale.						
2 WATER WELL OWNER: Dempsey, Albert P.						
RR#, St. Address, Box #: 1191 E. 26th Ave. City, State, ZIP Code: Manhattan, KS 66502 Board of Agriculture, Division of Water Resources Application Number:						
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL						
N	u		1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Sup 6 Oil Field Water: 7 Lawn and Garden (8 Air Conditioning	Supply 10 Monitorin Only 11 Injection 12 Other	g Well Well
x s	Was a chemical/bacteriological sample submitted to Department? YesNo.X. If yes, mo/day/yr sample was submitted					
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 diameter						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From. 6.5.ft. to3.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 storag 13 Insecticide storage 14 Abandoned water 15 Oil well/Gas wel	ge age well	ecify below)
Direction from well? West to southwest How many feet? 1,800						
FROM	то	PL	UGGING MATERIALS			
52'	8'	Sand				
8'	6.5'	Clay/su	ıbsoil			
6.5'	31	Bentoni	ite clay (plug)			
3'	0	Topsoil				
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. Please press firmly and print clearly. Please fill in blanks,						

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.