ID NO. 0033/278

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
			4	·		
_	ance and direction from nearest town or o	w 45W 45W4		11	24 <sub>(1)</sub> w	
0.010		40 State Ave, Kans	•			
2						
	RR #, St. Address, Box #: City, State, ZIP Code : Castle Rock, CO. 80104  Board of Agriculture, Division of Water Resources Application Number:					
3	MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
	AN "X" IN SECTION BOX:	WELL'S STATIC WATER LEVEL 9.6. ft.				
Γ	N	WELL WAS USED AS:				
	NIM NIF	1 Domestic	E. Bublio Water Cupply	<u>9</u> Dewateri		
	NW NE	2 Irrigation	<ul><li>5 Public Water Supply</li><li>6 Oil Field Water Supp</li></ul>	ly 10 Monitorin	ng Well	
w		3 Feedlot 4 Industrial	<ul><li>7 Domestic (Lawn &amp; G</li><li>8 Air Conditioning</li></ul>	,	Well	
SW SE SE If yes, mo/day/yr sample was submitted to Department? Yes					No.X	
	•	Water Well Disinfected: Ye	es No <b>X</b>			
	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 diamete 2.0 in. Was casing pulled? Yes						
6		eat cement 2 Cement gro		Other Soul		
0		to 1	, Fromft to	ft., From	to ft.	
	What is the nearest source of possible		4)			
1 Septic tank		6 Seepage pit	11 Fuel storage	16 Other (spe	cify below)	
<ul><li>2 Sewer lines</li><li>3 Watertight sewer lines</li></ul>		<ul><li>7 Pit privy</li><li>8 Sewage lagoon</li></ul>	<ul><li>12 Fertilizer storage</li><li>13 Insecticide storage</li></ul>			
4 Lateral lines		9 Feedyard	14 Abandoned water well			
5 Cess pool  Direction from well?		10 Livestock pens	15 Oil well/Gas well			
	Direction from well?	How many	feet?!			
FROM TO PLU		UGGING MATERIALS		Flush mt manway was removed and 2" well		
			casing was	drilled and pull	ed out to TD. /4	
			Bentonite f	rom/4/-//		
			Cement from	1		
			Soil from /	1-0'		
7	CONTRACTOR'S OF LANDOWNE	under my jurisdiction a	nd was completed on			
(mo/day/year)					edge and belief. Kansas	
	under th	e business name of	Environment	al sevices		
	by (signature)	XILLI				

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, 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.