1 LOCATION OF WATER WELL:	Fraction NE _{1/4} NE _{1/4} SE _{1/4}	Section Number	Township Number	Range Number	
County: WYANDOTTE					
Distance and direction from near		t address of well if	located within city?		
308 N.18th KS,C WATER WELL OWNER: CLARK	<u>ITY KS</u> PEF & MARKETIN	rG			
RR#, St. Address, Box #: 800 City, State, ZIP Code : GLEN	ROOSEVELT RD. ELLEN, ILL, 6013	7 Application N		Water Resources	
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL	15 10	ft.		
N Section Box.	WELL'S STATIC WAT	ER LEVEL	ft.		
	WELL WAS USED AS:				
		F B11		_	
	1 Domestic 2 Irrigation	6 Oil Field Water	Supply TO Monitorin	g Well	
	3 Feedlot E 4 Industrial	7 Lawn and Garden	Only 11 Injection	Well	
w x	E 4 Industrial	6 AIR CONDICTIONING	12 Uther		
S W S E	Was a chemical/hact	eriological sample s	ubmitted to Departmen	t? Yes No	
]]]		ample was submitted.		t: lesno	
	Water Well Disinfec	ted: Yes No		•	
s					
5 TYPE OF BLANK CASING USED:		·			
└── 1 Steel 3 RMP (SR) 5 Wro	ught 7 Fiber	glass 9 Other	(specify below)		
				5'	
Blank casing diameter	in. Was casing	pulled? Yes	No If yes, how	5' much	
Casing height above or below	land surface Q	in.	,,		
6 GROUT PLUG MATERIAL: X1 Neat	cement 2 Cement gro	ut X3 Bentonite	4 Other		
니 Grout Plug Intervals: Fro	15 _{ft} to 3	From ft to	O ft From	to ft	
			o , , , , , , , , , , , , , , , ,		
What is the nearest source o					
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (sp	ecify below)	
1 Septic tank 6 Seepage pit X1 2 Sewer lines 7 Pit privy 1 Watertight sewer lines 8 Sewage lagoon 1 4 Lateral lines 9 Feedyard 1		12 Fertilizer storag	Fertilizer storage		
4 Lateral lines	9 Feedyard	14 Abandoned water	well		
	10 Livestock pens	<u>-</u>			
Direction from well? £a.	<i>s.f.</i>	How many feet?	:>		
FROM TO PLU	JGGING MATERIALS				
OVERDRILLED TO D	EPTH OF 15'				
PLACED NEAT CEME	INT GROUT W/6%	BENTONITE			
	PIPE 15' - 3'	. 			
PLACED BENTONITE	CHIPS 3' - 6'				
CONCRETE CAP TO TOTAL VOLUME GRO					
TOTAL VOLUME GRO	OI 31 GWPPOND				
		\dashv			
7 CONTRACTOR'S OR LANDOWNER'S	CERTIFICATION: This wate	r well was plugged u	nder my jurisdiction	and was completed	
on (mo/day/year)1.11.3 Water Well Contractor's Lice	nse No575	This Water Well	Record was completed	on (mo/day/year)	
1.1-26-9.7/:/	under the business nam	e of . \mathbf{KURTZ} . \mathbf{EN}	VIRONMENTÄLS	ERVICE	
by (signature)	M				
INSTRUCTIONS: Use typewriter or mall 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.