1 LOCATI	ON OF WATE	R WELL:	Fraction	Section Number	Township Number	Range Number	
County:	#2 Dickin	eon	NE1/4 1/4 SW14	25	14	3 E	
Distance and direction from nearest town or city street address of well if located within city?							
Three miles east of Navarre onNorth side of road in farmstead.							
2 WATER WELL OWNER: Florence Morehouse							
RR#, St. Address, Box #: 2110 Meadowlake Rd Board of Agriculture, Division of Water Resources							
City, State, ZIP Code: Manhattan, KS 66502 Application Number:							
	ELL'S LOCA IN SECTIO N			74 er level2.1			
	WELL'S STATIC WATER LEVEL						
N	W	N E	1 Domestic 2 Irrigation	5 Public Water Sup 6 Oil Field Water			
		- E	3 Feedlot		Only 11 Injection	Well	
W	27	-	4 Industriat	8 ATE CONDICTIONING	12 Utner	•••••	
Was a chemical/bacteriological sample submitted to Department? YesNo.X. If yes, mo/day/yr sample was submitted							
	Water Well Disinfected: YesX. No						
_	s		water water profits	teu. Tearrys as 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 diameterin. 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: From							
What is the nearest source of possible contamination:							
1 Sei	otic tank		6 Seepage pit	11 Fuel storage	16 Other (en	asify balou)	
2 Sewer lines 7			7 Pit privy	12 Fertilizer storag		ecity below)	
			8 Sewage lagoon 9 Feedyard	13 Insecticide store 14 Abandoned water w			
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well? North How many feet? 20							
FROM	то		GING MATERIALS				
0	7	Topsci	1				
7	10	Benton	ite plug	_			
10	49	Clay_					
49	74	gravel					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
by (signature) X. Florence: M. Srehman							
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.