KSA 82a-1212

| 1 LOCATIO                 | N OF WATER  | WELL:                       | Fraction  | Section Number   | Township Number                | Range Number      |
|---------------------------|---|-----------------------------|---|--|--------------------------------|-------------------|
| County: L                 | YOK   | 4                           | 501/501/4501/4  | 15   | 16                             | 116               |
| Distance a                | nd directi  | on from nea                 | rest town or city stree   | t address of well if   | located within city?           |                   |
|                           |   |                             | NEY L. MAX  |  |                                |                   |
| RR#, St. A<br>City, State | ddress, Bo<br>e, ZIP Cod  | x #: 23<br>le : AMI         | 69 ROAD JS<br>ERICUS TO 66  | Application Nu   | culture, Division of<br>umber: | Water Resources   |
| 3 MARK WE                 |   | ION WITH                    | 4 DEPTH OF WELL   |  |                                |                   |
|                           |   |                             | WELL WAS USED AS:   | •  |                                |                   |
| W                         | W   | N E                         | 1 Domestic<br>2 Irrigation  | 5 Public Water Sup<br>6 Oil Field Water 5<br>7 Lawn and Garden 0<br>8 Air Conditioning                         | Supply 10 Monitorin            |                   |
| s                         | w   | S E                         | If yes, mo/day/yr s   | eriological sample so<br>ample was submitted.<br>ted: Yes No   |                                | t? YesNoX.        |
|                           | S   |                             |   |  |                                |                   |
| 5 TYPE OF                 | BLANK CAS   | ING USED:                   |   |  |                                |                   |
| 1 Steel<br>2 PVC          | 3 RMP (<br>4 ABS  | SR) 5 Wro<br>6 Asb          | estos-Cement 8 Concr  |  |                                |                   |
| Blank c<br>Casing         | asing diam<br>height abo  | neter6<br>ove or below      | in. Was casing  | publed? Yes. 🐥 I   | No If yes, how                 | much6.0           |
| 6 GROUT P                 | LUG MATERI  | AL: 1 Neat                  | cement 2 Cement gro   | out / 3 Bentonite  | 4 Other                        |                   |
| Grout P                   | lug Interv  | vals: Fro                   | Mr.S.ft. tol.4.Sft  | ., Fromft. to  | oft., From                     | toft.             |
| What is                   | the neare   | est source o                | of possible contamination   | n:   |                                |                   |
| 2 Sew<br>3 Wat<br>4 Lat   | otic tank<br>Her lines<br>Hertight se<br>Heral lines<br>Hs Pool | ewer lines                  | 6 Seepage pit<br>7 Pit privy<br>8 Sewage lagoon<br>9 Feedyard<br>10 Livestock pens  | 11 Fuel storage<br>12 Fertilizer stora<br>13 Insecticide stora<br>14 Abandoned water of<br>15 Oil well/Gas wel | ge<br>age<br>well              | ecify below)      |
| Directi                   | on from we  | ett? . <i>M</i>             | NW  | How many feet?   | 80                             |                   |
| FROM                      | то  | PL                          | UGGING MATERIALS  |  |                                |                   |
| 0                         | 45  | CLA                         | 180,6   |  |                                |                   |
| 4.5                       | 14.5  |                             | VTO NITE  |  |                                |                   |
| 14.5                      | 20  |                             | SULL  |  |                                | ***               |
| 20                        | 60  |                             | CHAT  |  |                                | My c              |
| 0-0                       |   |                             |   |  | Maga                           |                   |
|                           |   |                             |   |  | ¥ .                            |                   |
|                           |   |                             |   |  |                                |                   |
| on (mo/<br>Water W        | day/year).  | actor's Lice                | CERTAFICATION: This water and this reconse No                                       | ord is true to the be<br>This Water Well<br>ne of  | st of my knowledge ar          | nd belief. Kansas |
| underline                 | or circle<br>Water, Top   | the correct<br>beka, Kansas | or ball point pen. <u>Plea</u><br>c answers. Send top thi<br>c 66620-0001. Telephoi | ree copies to Kansas   | Department of Health           | and Environment,  |