1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: LUDN	1/4 NE1/4 NE1/4	25	17	10	
Distance and direction from near	rest town or city stree	address of well if	located within city?		
2 WATER WELL OWNER: Glen Allen					
RR#, St. Address, Box #: 637		Board of Agric	culture, Division of	Water Resources	
City, State, ZIP Code : Am	enous, KS 668	35 Application No	umber:		
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		13. U			
N	1	ER LEVEL	ft.		
<u>*</u>   _	WELL WAS USED AS:	E Bullet - Hahan Our			
N WN E	1) Domestic 2 Irrigation		Supply 10 Monitorin	10 Monitoring Well	
W	5 Feedlot 4 Industrial	8 Air Conditioning			
S WS E	Was a chemical/hact	eriological sample si	ubmitted to Departmen	at? Yes No X	
If yes, mo/day/yr sample was submitted					
Water Well Disinfected: Yes. X No					
5 TYPE OF BLANK CASING USED:				·	
1 Steel 3 RMP (SR) 5 Wrot	ught 7 Fiber estos-Cement 8 Concr	glass 9 Other,	(specify below)		
			AT .		
Blank casing diameter	<pre>!in. Was casing   land surface</pre>	pulled? Yes   in.	No∦ If yes, how	much	
6 GROUT PLUG MATERIAL: 1 Neat		- Constitution -	4 Other		
Grout Plug Intervals: From	n.465.ft. to5ft	., Fromft. t	oft., From	toft.	
What is the nearest source o	f possible contaminatio	n:			
1 Septic tank 6 Seepage pit 11 Fuél storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage					
②Sewer lines 7 Pit privy 12 Fertilizer storage					
5 Cess Pool	10 Livestock pens	15 Oil well/Gas wel	ι		
Direction from well?		How many feet?			
	JGGING MATERIALS				
0 4.5 7005	011				
	on ile				
5,0 18.0 grav	er				
	THE THIRD IS NOT THE THE THE THE THE THE THE THE THE TH				
7 CONTRACTOR'S OR LANDOWNER'S	CERTIFICATION:This wate	 r well was plugged u	nder my jurisdiction	and was completed	
on (mo/day/year)	nse No	rd is true to the be	st of my knowledge ar	nd belief. Kansas fon (mo/day/year)	
by (signature)	under the business nam	e of			
	•				

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.