1 LOCATION OF	WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: LY	ON	SE1/4SE1/4SE1/4	3/	18	13 €	
Distance and o		rest town or city street		located within city	?	
2 HATER HELL		1.SMK OF EM	PORIA KS.		74.450.450.450.450.450.450.450.450.450.45	
2 WATER WELL		EZ O'MARA 18 RO 190				
City, State, 2	ess, Box #: PER	DING KS. 668	68 Application Nu		Water Resources	
	S LOCATION WITH	L	22			
	N	WELL'S STATIC WATE	WELL'S STATIC WATER LEVELft.			
		WELL WAS USED AS:				
n'w	N	1 Domestic 2 Irrigation	5 Public Water Supp 6 Oil Field Water S			
W		3 Feedlot E 4 Industrial	7 Lawn and Garden (8 Air Conditioning	Only 11 Injectio	n Well	
88		- Thatstrat	o All conditioning	TE OTHER III		
S W S E Was a chemical/bacteriological sample submitted to Department? YesNo						
Water Well Disinfected: Yes. X No						
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 diameter						
Casing heig	ght above or below	land surface	Qin.	22.2		
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
				o 🐔ft., From. 🕫	ກ to√nft.	
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)						
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify be 2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage Lagoon 13 Insecticide storage						
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well? 2-58-VE. How many feet? 2-78-50.						
		UGGING MATERIALS				
0 4,		**************************************				
48		SOIL TOWITE				
SI		Y SOIL				
1	2 SA/	•				
	.2					
Walter State of the State of th						
7 CONTRACTOR	S OR LANDOWNER'S	CERTIFICATION: This water	r well was plugged up	nder my jurisdiction	and was completed	
Water Well	Contractor's Lice	ense No	This Water Well	Record was complete	d on (mo/day/year)	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						

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.