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From ft. to ft. From ft. To ft				•			4	· · · · · · · · · · · · · · · · · · ·	
GRAVEL PACK INTERVALS: From ft. to ft., From ft., to	SUREEN-	FERFORATI	ED INTERVALS.						
GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other 1. From 1. Continervals: 1. From 1. Continervals: 1. Septic tank 4 Lateral lines 7 Pit privy 1. From 1. From 1. Livestock pens 1. Septic tank 4 Lateral lines 7 Pit privy 1. From 1. From 1. From 1. Livestock pens 1. Septic tank 4 Lateral lines 7 Pit privy 1. Fertilizer storage 1. Other (specify below) 3 Watertight sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 13 Insecticide storage 16 Other (specify below) 13 Insecticide storage 15 Oli well/Cas well 16 Other (specify below) 17 How many feet? 18 PLUGGING INTERVALS 19 PLUGGING INTERVALS 10 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 2 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 3 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 3 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 3 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 3 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 4 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 4 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under interprivation and was completed on (mo/day/year) 4 CONTRACTOR'S OR LANDOWNER	(GRAVEL PA	CK INTERVALS:						
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2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Waterlight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS FROM TO PLUGGING INTERVALS CENTRAL SWOLL SWOL	What is th	ne nearest so	ource of possible of	ontamination:			10 Live	stock pens	14 Abandoned water well
(3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS CENERY SCOUT CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, (3) plugged under may jurisdiction and was completed on (mo/day/year). Alter Well Contractor's License No. This Water Well Record was completed on (mo/day/year). INSTRUCTIONS: Use typewriter or bell point feen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct systems. Send top prints copies to Kansas Department.	1 Se	eptic tank	4 Lateral	lines	7 Pit privy		11 Fuel	storage	15 Oil well/Gas well
Direction from well? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS FROM TO SAND AND SEQUEL GENERAL SHOULT CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, of (3) plugged under my jurisdiction and was completed on (mo/day/year) Alter Well Contractor's License No. This Water Well Record was completed on (mo/day/year) INSTRUCTIONS: Use typewriter or ball point fon. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct ariskings. Selfed top print for plant point fon. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct ariskings.	2 Se	ewer lines	5 Cess p	oool	8 Sewage i	agoon	12 Ferti	lizer storage	16 Other (specify below)
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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	completed	d on (mo/day	/year) /	S CERTIFICAT	<i>t G</i>		and this rec	ord is true to the best of	
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of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your fecords.	completed Water We	d on (mo/day ell Contractor	year)	08/9	This Water	Well Record wa	and this rec as completed	ord is true to the best of on (mo/day/yr)	
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RALPH SCHIFFBAUER