		г	T	Γ
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
county: Sedawick	NW1/4/W1/45W1/4	20	265	1E
Distance and direction from nearest town or city street address of well if located within city?  4950 N. Seneca				
2 WATER WELL OWNER: Richard Phinney				
RR#, St. Address, Box #: 4950 N. Seneca City, State, ZIP Code: Wichita, KS 67204  Application Number:				
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL		ft. below bar	_
N WELL'S STATIC WATER LEVEL. 10:5ft. below basement flo				
WELL WAS USED AS:				
N'W	1 Domestic 2 Irrigation	5 Public Water Sup 6 Oil Field Water		
W	3 Feedlot E 4 Industrial	7 Lawn and Garden 8 Air Conditioning	Only 11 Injection	Well, A
"K	2 mastrice	o kill dollar rolling		
S'W S'E   Was a chemical/bacteriological sample submitted to Department? YesNo				
Water Well Disinfected: Yes No.X				
S Water wett brannested. Testim No.2.1.				
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				
Casing height above or below the surface.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
Grout Plug Intervals: Fromft. toft., Fromft. toft., From				
What is the nearest source of possible contamination:				
1 Septic tank	6 Seepage pit	11 Fuel storage	Other (sp	ecify below)
2 Sewer lines 7 Pit privy 12 Fertilizer storage 5 Sewage lagoon 13 Insecticide storage 4 Lateral Lines 9 Feedvard 14 Abandoned water well				
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	15 Oil well/Gas wel	l	
Direction from well? South				
FROM TO PL	UGGING MATERIALS			
3/0 0 Part	and Climent	0=	Wasement	floor
	N			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed				
on (mo/day/year)				
by (signature) Supplier the bysiness name of				
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle				

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. Felephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.