1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: SEDGWICK	WE 1/4 SEE1/4 SW1/4	29	265	RIE
Distance and direction from nearest town or city street address of well if located within city?				
N.E. CORNER OF MAINTAINANCE BUILDING				
WATER WELL OWNER: S. W. BELL				
RR#, St. Address, Box #: 3917 N.ARKANSAS City, State, ZIP Code: WICHTAKS, 67204 Board of Agriculture, Division of Water Resources Application Number:				
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL				
N WELL'S STATIC WATER LEVELft.				
WELL WAS USED AS:				
N'W-N'E-	1 Domestic	5 Public Water Supply 6 Oil Field Water Supply 10 Monitoring Well		
	3 Feedlot	7 Lawn and Garden Only 11 Injection Well		
W	E 4 Industrial	8 Air Conditioning	12 Other	
Was a chemical/bacteriological sample submitted to Department? YesNo If yes, mo/day/yr sample was submitted				
Water Well Disinfected: Yes NoX				
S Water wett bisimected: Tes No. 3711				
5 TYPE OF BLANK CASING USED:				
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)				
Z PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile				
Blank casing diameter				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3 Bentonite) 4 Other				
Grout Plug Intervals: From. 10 ft. to				
What is the nearest source of possible contamination:				
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)				
2 Sewer lines 7 Pit privy 12 Fertilizer storage				
4 Lateral lines 9 Feedyard 14 Abandoned water well				
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well				
Direction from well?		How many feet?	• • • • • • • • • • • • • • • • • • • •	
FROM TO	PLUGGING MATERIALS	_		
1.0 24.0 BENT	WITE CHIPS	_		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)				
Water Well Contractor's License No				
by (signature) Andrews. Thornton				

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