1 LOCATI	ON OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
			16	2-6-5	I - F
County: SED 6 WICK 5W1/4 5W1/4 16 26-5 1-E Distance and direction from nearest town or city street address of well if located within city?					
57+L & Broglwy M. Park City. Ks. MW#4					
2 WATER WELL OWNER: COASTAL RET'S MAIKSTING INC KS RSHINING DIVISION					
Board of Agriculture, Division of Water Resources					
City, State, ZIP Code: El Cora do KS 67042 Application Number:					
	VELL'S LOCATION WITH IN SECTION BOX:	4 DEPTH OF WELL	2_3 ft		
	N	WELL'S STATIC WATER	RLEVEL ft.		
		WELL WAS USED AS:			
N V	v —— N E ——	1 Domestic	5 Public Water Supp	ly 9 Dewate	ering
		2 Irrigation 3 Feedlot	6 Oil Field Water Sup 7 Domestic (Lawn &		ring Well on Well
W	E	4 Industrial	8 Air Conditioning		
Was a chemical / bacteriological sample submitted to Department?Yes					
If yes, mo/day/yr sample was submitted					
	S	Water Well Disinfected:	Yes No		
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)					
PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
	asing diameter? in. height above or below land :	Was casing pulled?		If yes, how me	uch
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout @ Bentonite 4 Other					
Grout Plug Intervals: From					
What is the nearest source of possible contamination:					
1	otic tank wer lines	6 Seepage pit 7 Pit privy	11 Fuel storage 12 Fertilizer storage	16 Other (sp	ecify below)
Watertight sewer lines		8 Sewage lagoon	13 Insecticide stora	ige	••••••
4 Lateral lines 5 Cess Pool		9 Feedyard 10 Livestock pens	14 Abandoned wate15 Oil well/Gas well		
Direction from well? WSST How many feet? 37					
FROM TO PLUGGING MATERIALS					
- now					
25	.5 BENTON	tr Chips			
اد،	0 61av1				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 5.7.5 This Water Well Record was completed on (mo/day/year) under the business name of FUNKEL DAI MILLS SALUKE TO CONTRACTORY.					
by (signature) under the business name of JUNA 12 UNIVITY SELECTION OF					
					ne or circle the correct
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.					