ID NO. ____

1	LOCAT	ION OF WATE	R WELL:		raction		Secti	on Number	Township	Number	Range	Number
Co	ounty:	DEDGO	NICK	N	N1/4 N1	E 14 NW 14		16	26	S		€
Dis	,			n or city	1	ddress of well if I				61.55		
H			VEST	of		esection	; د	Bronbuny	AND			
2	WATER	WELL OWNE	R: C1TY 6110	OF N	TYTH OKTH	x City Hydrai	ALI C	Cm	,	LN		
		Address, Box e, ZIP Code	# PARK					Board of Agriculture, Application Number:	Division of Wa	iter Resource	98	
3		WELL'S LOCA		4		H OF WELL	71.	7 n				
H	AN "X" IN SECTION BOX:				WELL	'S STATIC WATE	D I EVEL	21.50 n				
		X N	· · · · · · · · · · · · · · · · · · ·	1			HILLACL					
		l'	 			WAS USED AS:				0 D		
	N	w	— N E			Domestic ! Irrigation	_	Public Water Suppl Oil Field Water Sup	-	9 Dewat	ering oring Well	
w				E		Feedlot Industrial		Domestic (Lawn & Air Conditioning	Garden)	•	on Well	
				,,				J	d to Departn			-X
Was a chemical / bacteriological sample submitted to Department?Yes If yes, mo/day/yr sample was submitted												
] "	ater We	Il Disinfected:	Yes	No				
<u></u>		S										
TYPE OF BLANK CASING USED:												
	① Stee 2 PVC		` '	Wroug Asbes	•	7 Fiberq nent 8 Concr	-	9 Other (Specify	below)			
	Blank (casing diame	eter12	. in. and surf	Was	casing pulled?	Yes in.	 No	If	yes, how m	nuch3	PEEL
6	Casing height above or below land surface											
										ft		
What is the nearest source of possible contamination:												
	1 Septic tank 6 Seepage pit						11	•			ecify below)	A-L
2 Sewer lines 3 Watertight sewe			er lines	5 5			13	12 Fertilizer storage 13 Insecticide storage				
4 Lateral lines 5 Cess Pool				9 Feedyard 10 Livestock pens			14 Abandoned water well 15 Oil well/Gas well					
	Direct	tion from we	II? NOT	P_TH		How mar	ny feet?.	1000.	Approx.			
-	FROM	то	l		NG MATI	ERIAL S	-	1000.	401-40	1	_	
171011								CITY	MEM	. No.	>	
0 100		21.50	_	MEN		GROUT						
Ľ	21,50	47.	CHLO	PUNAT	(E30	SAND						
\vdash												
-												
L		<u> </u>										
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well on (mo/day/year) and this rewater Well Contractor's License No								r well was plugge d this record is true	ed under my to the best o	jurisdictio f my knowle	n and was d edge and belie	ompleted of. Kansas
Water Well Contractor's License No								AYNE WEST	Water Well Re	cord was cor	mpleted on (mo	ɔ/day/year)
	by (sign	nature)		16	ud)	leg-	***************************************				·····	
II	NSTRUC	TIONS: Use	typewriter	or ball p	oint pen	. Please press	firmly an	d print clearly. Plea	ase fill in bla	nks, underli	ne or circle th	ne correct
T	nswers. elephone:	send top th 785/296-356	ree copies 1 85. Send one	to Kans to Wate	as Depa r Well Ov	artment of Heaviner and retain o	one for yo	Environment, Bur our records.	ieau oi wate	a, ropeka,	1101000	<i>,</i> _U-UUU I .