1 LOCATION OF WATER WELL: Fra	action	Section Number	Township Number	Range Number
County: Con a series AFF	1/44 a. A/4### #/4	32	T265	RIE
County: SEDGWICK NE				
Distance and direction from nearest town or city street address of well if located within city?  Basement - 3707 N. ARMSTRONG, WICHITA, KS				
2 WATER WELL OWNER: Edward Yping				
2 WATER WELL OWNER: Edward Louing  RR#, St. Address, Box #: 126 E. 2 d Ar.  City, State, ZIP Code: El Dorado, KS 67042 Application Number: Unknown  Application Number: Unknown  Board of Agriculture, Division of Water Resources  Application Number: Unknown  Board of Agriculture, Division of Water Resources  Application Number: Unknown  Board of Agriculture, Division of Water Resources  Application Number: Unknown				
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELLft.				
AN "X" IN SECTION BOX:  WELL'S STATIC WATER LEVEL				
WELL WAS USED AS:				
N W N E 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well				
<u>u</u>	3 Feedlot 4 4 Industrial	7 Lawn and Garden ( 8 Air Conditioning		
	4 Made 1	o Att Conditioning	•	
S W				
If yes, mo/day/yr sample was submitted				
Water Well Disinfected: Yes No				
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 diameter				
Casing height above or below land surface				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement group 3 Bentonite 4 Other				
Grout Plug Intervals: From./.Vft. to3ft., From3.ft. to .Qft., From toft.				
What is the nearest source of possible contamination:				
2 Sewer lines 7 Pit privy 12 Fertilizer storage				
	Sewage lagoon Feedyard	13 Insecticide store 14 Abandoned water w	ige 🛧	reatment
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well				
Direction from well? South How many feet? 2 + T				
FROM TO PLUGGIN	IG MATERIALS			
3 0 Cemer	+			•
10 3 Benton	. 10			:
	7,10			
18 10 Jand	bleach	_		
· · · · · · · · · · · · · · · · · · ·		_		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed				
on (mo/day/year)				
by (signature) under the business name of JMEnterprises.				
INSTRUCTIONS: Use typeworter 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: 913/296-3565. Send one to Water Well Owner and retain one for your records.				