\sqcup	ON OF WATE		Fraction	- 1	Section Number	Township 27	Number	Range Number	
	SED6u		NW1/45W1/45W					1 E	
Distance and direction from nearest town or city street address of well if located within city? 2046 S. MARKET, WICHITA, KS 67211 (LOTS 284 EE, MARSHALL									
2 WATER WELL OWNER: DONAYON PUTLEDGE ADDITION)									
RR#, St. Address, Box #: 2080 SW LINCOLN City, State, ZIP Code: TORKA, KS 66604 Board of Agriculture, Division of Water Resources Application Number:									
1 1	ELL'S LOCA IN SECTION				22. LEVEL 14				
			WELL WAS USED	AS:					
W	W	N E	1 Domestic 2 Irrigation 3 Feedlot 4 Industria	n 6	Public Water Sup Oil Field Water: Lawn and Garden (Air Conditioning	Supply 10 Only 11	Dewatering Monitoring Injection Other	g Well Well	
x s	Was a chemical/bacteriological sample submitted to Department? YesNo.X. If yes, mo/day/yr sample was submitted								
	S		Water Well Disin	fected	: Yes No.	ፈ			
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 DRIVEN SAND POINT									
Blank casing diameter. I. in LD Was casing pulled? Yes No. X. If yes, how much									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Plug Intervals: From. 7.7 ft. toft., Fromft. toft., From toft.									
What is the nearest source of possible contamination:									
1 Septic tank 6 Seepage pit 2 Sewer lines 7 Pit privy 3 Watertight sewer lines 8 Sewage lagood 4 Lateral lines 9 Feedyard 5 Cess Pool 10 Livestock pe				12 13 14	Fuel storage Fertilizer storag Insecticide stora Abandoned water w Oil well/Gas well	ge age well	0ther (spe TERMI TREAT 1970		
Direction from well? PSPIMETER BASEMENTHOW many feet?									
FROM	то	PLU	JGGING MATERIALS		HOTE ! WE	ELL WAS	CAPPE	D AIR-TIGHT	
22	0	CEMENT	GROUT				20 YE	ARS BEFORE	
	MORTAR MUSHROOM				BENG PLUGGED GROUT PLUG				
	CAPPED AT BASEMENT			7					
		FLOOR	LEVEL DRY	,		7877 7465	J FLOO	X2	
		BASEME	ENTI			主	7		
						— — Drive	11142 M	POINT	
TONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)									
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks,									

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.