		T			B N	
	ION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County:	36	NEINEILS#14	27	27	15	
Distance and direction from nearest town or city street address of well if located within city? 501						
2 WATER WELL OWNER: Larry Schauner						
RR#, St. Address, Box #: //2   Schoolfer Board of Agriculture, Division of Water Resources City, State, ZIP Code : Wichita K5 672/1  Board of Agriculture, Division of Water Resources Application Number:						
3 MARK	MARK WELL'S LOCATION WITH  4 DEPTH OF WELL					
	well was used as: Hos not been used for 7 yrs					
	N W	1 Domestic	5 Public Water Sup			
		2 Irrigation 3 Feedlot	6 Oil Field Water 9	Supply 10 Monitorin Only 11 Injection	g Well Well	
•		E 4 Industrial  IN bacsem	8 Air Conditioning NT of Hous	12 Other		
Same SE  Was a chemical/bacteriological sample submitted to Department? YesNo.!  If yes, mo/day/yr sample was submitted						
L	s	Water Well Disinfect	ted: Yes No	<u></u>		
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. Ain. Was casing pulled? Yes. No If yes, how much. Casing height above or below land surface						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From. 12. ft. to. 15ft., From. 18ft. to 1.15ft., From. 14. to. 15ft.						
What is the nearest source of possible contamination:						
72.50	eptic tank ewer lines	7.0%	11 Fuel storage 12 Fertilizer storag	16 Other (sp	ecify below)	
	itertight sewer lines iteral lines	8 Sewage lagoon	13 Insecticide store 14 Abandoned water w			
	ess Pool	to attraction perio	15 Oil well/Gas well ر	· _		
Direction from well?						
FROM TO PLUGGING MATERIALS						
	Quickgrote					
	C. C. C. C.	1.01-				
			_			
			$\dashv$			
			_			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed						
on (mo/day/year). O.1 - 1.1 70. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year)						
.03		under the business name	of	Did wor		
	aur	A Chause	_ LOONET	wrint clearly Blees	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.