			1	T			
1 LOC	ATION OF	WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County	Secla	wick	NN1145W14NE114	34	T275	RIE_	
Distance and direction from nearest town or city street address of well if located within city?							
NE Corner - detached garage 17075. Valutsia 2 WATER WELL OWNER: ROSEBLAKEY Wichita KS							
2 WATER WELL OWNER: ROSE BLAKEY / Wichita KS							
RR#, St. Address, Box #: City, State, ZIP Code: Portland, OR 97266 Board of Agriculture, Division of Water Resources Application Number: Unknown							
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELLft.							
	N WELL'S STATIC WATER LEVEL						
			WELL WAS USED AS:	E Bullife Hates General	-lu O Douatania	_	
	N W N E 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Tawn and Garden Dntv 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other						
w							
	S W S E Was a chemical/bacteriological sample submitted to Department? YesNo If yes, mo/day/yr sample was submitted						
	Water Well Disinfected: Yes. No						
	S water wett bisintected: Yes. Wt 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							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From 18ft. to.2ft., From2.ft. to.0ft., From toft.							
What is the nearest source of possible contamination:							
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below							
2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage Lagoon 13 Insecticide storage						10 +00	
4	4 Lateral lines 9 Feedyard 14 Abandoned water well						
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well? NOLT.H							
FRO	FROM TO PLUGGING MATERIALS						
Z	2 0 Cement						
18	2	bento	rite bleach			Ì	
						{	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
Water Well Contractor's License No 428 This Water_Well Record was completed on (mo/day/year)							
by (signature)							
INSTRUCTIONS: Use typogygitar or hill point per Place procedingly addict along the black of the							
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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.							