	200 200 1000 00			
1 LOCATION OF WATER WELL:	Fraction CAN	Section Number	Township Number	Range Number
county: Schwick	1/4/11/4/1/4	27	T275	RIE
Distance and direction from near	arest town or city street	t address of well if	located within city?	
2337 Mesita				
	ura s. Bemhara	<b>U</b>		
RR#, St. Address, Box #: 233 City, State, ZIP Code : WIC	n Mesita Chita, Ks 612	Application Nu	culture, Division of N umber:	Water Resources
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL25			
AN "X" IN SECTION BOX:  N WELL'S STATIC WATER LEVEL 20ft.				
	WELL WAS USED AS:			
N W N E-	1 Domestic	5 Public Water Supp		•
	2 Irrigation 3 Feedlot	6 Oil Field Water S 7 Lawn and Garden G		
W / /	E 4 Industrial	8 Air Conditioning	12 Other	
S W S E Was a chemical/bacteriological sample submitted to Department? YesNo.X.				
If yes, mo/day/yr sample was submitted				
S	Water Well Disinfect	ted: YesNo	<b></b>	
			1	
5 TYPE OF BLANK CASING USED: NO CASING - Sandpoint				
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	in. Was casing p	oulled? Yes N	lo If yes, how m	nuch
Casing height above or below	land surface	in.		
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (Cheptonic) 4 Other				
Grout Plug Intervals: From				
What is the nearest source of	of possible contamination	1:		
1 Septic tank		11 Fuel storage	16 Other (spe	cify below)
② Sewer lines 3 Watertight sewer lines		2 Fertilizer storage		
4 Lateral lines 5 Cess Pool	9 Feedyard	14 Abandoned water w 15 Oil well/Gas well	ell	
Direction from well? West How many feet?				
	UGGING MATERIALS	now many reet?		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
25 0 000	ACCUPATE TO			
Neat (	Climent	_		
7 CONTRACTOR'S OR LANDOWNER'S	ÇERTIFICATION:This water	 well was plugged un	der my jurisdiction a	nd was completed
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:This water well was plugged under my jurisdiction and was completed on (mo/day/year)				
by (signature) Junio	under the business name	Lof		
by (signature)				
NSTRUCTIONS: 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.