1 LOCATIO	ON OF WATER	WELL:	Stactions W NW N 1/4 E 1/4 E 1/4	Section Number	Township Number	Range Number
County:	18490	ojek.	1/4 2 1/40 - 1/4	36	213	IE
Distance	and directi		rest town or city stree	et address of well if	located within city?	
2	721		HANGE LIAM NICHO)/ <		
	JELL OWNER:	100	7 EXCHANGE	مسب		
	Address, Bo te, ZIP Coo		CHITA, 1<5. 6'		culture, Division of umber:	water kesources
	ELL'S LOCAT IN SECTION	ION WITH	4 DEPTH OF WELL	2.5 ER LEVEL 1.5	ft.	
	N		WELL'S STATIC WAT	ER LEVEL	ft.	
		X	WELL WAS USED AS:			
N N	w	—N ['] Е——	1 Domestic	5 Public Water Supp		
			2 Irrigation 3 Feedlot	6 Oil Field Water 9		
w			E 4 Industrial	8 Air Conditioning	12 Other	• • • • • • • • • • • • • • • • • • • •
s	<u></u>	S_E	Was a chemical/bact	eriological sample su	ubmitted to Departmen	t? YesNo. . X.
			If yes, mo/day/yr s	sample was submitted.	• • • • • • • • • • • • • • • • • • • •	
	s		Water Well Disinfed	ted: Yes. X No	••••	
5 TYPE O	F BLANK CAS	SING USED:				
」 1 Stee 2 PVC	l 3 RMP (4 ABS			glass 9 Other o	(specify below)	
2 PVC	4 ABS	O ASD	estos-tement a concr	ete iite		
Blank Casing	casing diam height abo	neter ove or below	in. Was casing land surface	pulled? Yes! L.ムルin.	No. A If yes, how	much
		AL: 1 Neat		out 3 Bentonite	4 Other	
Grout	Plug Interv	vals: From	n 25. ft. toft	., Fromft. to	oft., From	toft.
What is	s the neare	est source o	f possible contaminatio	n:	•	
1 Sei	otic tank		6 Seepage pit	11 Fuel storage	6 Other (sn	ecify below)
2 Se	er lines		7 Pit privy	12 Fertilizer storag	ge 72	
3 Watertight sewer lines 4 Lateral lines			8 Sewage lagoon 9 Feedyard	13 Insecticide store 14 Abandoned water w		TREATMENT
	s Pool		10 Livestock pens	15 Oil well/Gas well		Kenmen /
Direct	ion from we	ALL?	JORTH.	How many feet?	1.5	
FROM	то	PLI	JGGING MATERIALS			
25	0	CEM	ENT GROUT	-		
				\dashv		
				_		
7 CONTRA	CTOR'S OR L	ANDOWNER'S	REPUIFICATION: This wate	r well was plugged ur	nder my jurisdiction	and was completed
on (mo, Water∖	√day/year). Well Contra	ictor's Licei	nse No	This Water Well	Record was completed	on (mo/day/year)
			under the business nam	e of	· · · · · · · · · · · · · · · · · · ·	
						
			ball point pen. Plea	se press firmly and p		

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.