1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
county: Sedgwich	SIA 1/45B1/45E1/4	31	T275	RIE
Distance and directjon from nearest town or city street address of well if located within city?				
1246 Rita				
2 WATER WELL OWNER: Eta miller.				
RR#, St. Address, Box #: 1608 Parkdale City, State, ZIP Code: wichita 1567217 Application Number:				
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL				
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL D.Y. Yft.				
WELL WAS USED AS:				
N W N E 1 Domestic 5 Public Water Supply 9 Dewatering				
2 Irrigation 6 Gil Field Water Supply 10 Monitoring Well				
3 Feedlot Sawn and Garden Only Injection Well Injection Well Sawn and Garden Only Injection Well Sawn and Garden Only Injection Well Injec				
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				
Parhee Mater well distilled				
5 TYPE OF BLANK CASING USED:				
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile				
1				
Blank casing diameter				
Grout Plug Intervals: From				
What is the nearest source of possible contamination:				
Septic tank Sewer lines	6 Seepage pit 7 Pit privy	11 Fuel storage12 Fertilizer storage	16 Other (spe	cify below)
'3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage				
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned water w 15 Oil well/Gas well	vell	
Direction from well? How many feet?				
FROM TO PLUGGING MATERIALS				
FLUGGING MATERIALS				
5 Ceme	nt			
7				
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 This Water Well Record was completed on (mo/day/year)				
by (signature) Acide Libes 1-11-2000				



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.