1 Cc	LOCATION OF WATER WELL:	Fraction State 1/4	Section Number	Township Number	Range Number	
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL OWNER: PUTA Real totale (Rich Bould) RR#, St. Address, Box #: 8445 W. 13th Suite 102 Board of Agriculture, Division of Water Resources City, State, ZIP Code: With KO 67212 / Application Number:						
3						
	N WN E	WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Sup 6 9il Field Water S 7 Wawn and Garden G 8 Air Conditioning	Supply 10 Monitoring Only 11 Injection	y Well Well	
	Was a chemical/bacteriological sample submitted to Department? YesNo If yes, mo/day/yr sample was submitted					
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify balow) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter						
6	GROUT PLUG MATERIAL: 1 Neat cement 2 ement grout 3 Bentonite 4 Other					
	What is the nearest source o 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool	6 Seepage pit 7 Pit privy	n: 11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water w 15 Oil well/Gas well	age rell	Jip below)	
	Direction from well?		How many feet?			
	FROM TO PL	UGGING MATERIALS				
	168 91	avel				
	80 Cen	rent				
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)					
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: 785/296-3565. Send one to Water Well Owner and retain one for your records.						