	LOCATIO	ON OF WATER	R WELL:	Fraction	Section Number	Township Number	Range Number	
Distance and direction from nearest town or city street address of well if located within city? WEIL LOCATED AT 2996 WEdgewood Wich! HAKS, 67204								
2 WATER WELL OWNER: DENNISON Woods								
RR#, St. Address, Box #: 6303 E. ONEIGA City, State, ZIP Code: Wichith Ks. 67208 Board of Agriculture, Division of Water Resources Application Number:								
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL								
	AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVELft.							
WELL WAS USED AS:								
u		W	N E	1 Domestic 3 Feedlot 4 Industrial	5 Public Water Sup 6 Oil Field Water : 7 Lawn and Garden (8 Air Conditioning	Supply 10 Monitor Only 11 Injecti	ing Well	
							V	
Was a chemical/bacteriological sample submitted to Department? Yes							nent? YesNo. 1.	
				Water Well Disinfec	ted: Yes No	×		
_		<u>s</u>						
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 diameterin. Was casing pulled? Yes No If yes, how muchin.							
6	GROUT P	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
_	Grout P	Grout Plug Intervals: Fromft. toft., Fromft. toft., From						
	What is	What is the nearest source of possible contamination:						
	2 Sewer lines 7 Pit privy 1 3 Watertight sewer lines 8 Sewage lagoon 1 4 Lateral lines 9 Feedyard 1				11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water w 15 Oil well/Gas well	ge age well	specify below)	
Direction from well? How many feet?								
	FROM	то	PLI	UGGING MATERIALS	* Well i	is in Basen	ent concrete of with ut flush or	
					_ floor, u	ios pluggi	dwith	
					_ coverete	cenent gra	nt flush	
					with car	crete flo	or.	
				40 40 40		,		
_			148.0			. 6	460	
					Jen Jen	nin E	000000	
_1								
	CONTRACTOR'S OR LANDOWNER'S CERILEHATION:This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
Water Well Contractor's Icense No. المبلات This Water Well Record was completed on (mo/day/year) under the business name of								
	by (sig	nature) X				erty own	ek	
11	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.