1	LOCATION OF WATER WELL:  Sunty:  Out 1 71 CM   Fraction  1/4  1/4  1/4	Section	Number	Township	Number	Range Number	
Distance and direction from nearest town or city street address of well if located within city?							
214 S. St. France							
2	WATER WELLOWNER CHURCH				_		
_	RR #, St. Address, Box #: 1956 North City, State, ZIP Code : Wichtig 6		rd of Agriculture, lication Number:	Division of Wate	r Resources		
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		ft				
	N WELL'S STATIC WATE		ft.				
	WELL WAS USED AS		olic Water Suppl	., ,	Dowata	ring	
	1 Domestic 2 Irrigation 3 Feedlot	<b>∕</b> 6 Pil	Field Water Suppi nestic (Lawn &	pply 10		ing Well	
w	E 4 Industrial		Conditioning	12			
	S E Was a chemical / bacter if yes, mo/day/yr sam				nt?Yes	No X	
	Water Well Disinfected:	Yes X	No				
5	TYPE OF BLANK CASING USED:						
	Steel 3 RMP (SR) 5 Wrought 7 Fiber 2 PVC 4 ABS 6 Asbestos-Cement 8 Conc		Other (Specify	below)			
	Blank casing diameterin. Was casing pulled Casing height above or below land surface	l? Yes	X	If ye	s, how mu	ch	
6	GROUT PLUG MATERIAL: 1 Neat, cergent (2 Compent gr		ntonite 4 O	thor			
٢							
		n., From	ft. to	IL.,	From	to ft	
	What is the nearest source of possible contamination:  1 Septic tank 6 Seepage pit	11 F	uel storage	(16)	Other (spe	cify below)	
	2 Sewer lines 7 Pit privy	12 F	ertilizer storage		inge	Ψ., ρ	
	3 Watertight sewer lines 8 Sewage lagoon 4 Lateral lines 9 Feedyard		nsecticide stora bandoned water	•	gar	der	
	5 Cess Pool 10 Livestock pens		il well/Gas well	Well	0	/	
Direction from well? How many feet?							
F	FROM TO PLUGGING MATERIALS						
	36 12 gravel						
	12	***************************************					
	120 ament						
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: T	This water we	ell was plugged s record is true	d under my ju to the best of n	risdiction by knowled	and was completed ge and belief. Kansas	
	Water Well Contractor's License No.	].a	THIS	Vater Well Reco	d was comp	pleted on (mo/day/year)	
	by (signature)					K-a	
IN	ISTRUCTIONS: Use typewriter or ball point pen. Please press	s firmly and pr	int clearly. Plea	se fill in blanks	s, underline	e or circle the correct	
an	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.						