1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
Cc	ounty: StNWICK	6+ 14 NW 146W 14	71	<i>M</i>	1 1t	
Distance and direction from nearest town or city street address of well if located within city?						
_	WICHITA, KG.					
اے	WATER WELLOWNER: CITY IF WICHITA RR #, St. Address, Box #: MVD E.4th St., WICHITA, XS., U7714 Board of Agriculture, Division of Water Resources City, State, 7IP Code City, State, 7IP Code					
S.I.J. State, 2.1 334						
3	MARK WELL'S LOCATION WIT AN "X" IN SECTION BOX:	H 4 DEPTH OF WELL WELL'S STATIC WATER	RLEVEL 15. NU. ft.			
w	N W	WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply (10) Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other			
	S W — S E —		le was submitted		No	
5	TYPE OF BLANK CASING USE	ED:				
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 diameter 7.27 in. Was casing pulled? Yes No If yes, how much in. Casing height above or below land surface in.						
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite (4) Other					
	What is the nearest source of 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool	6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	Fuel storage (Figure 12 Fertilizer storage 13 Insecticide stora 14 Abandoned wate 15 Oil well/Gas well	e 'age ar well	pecify below)	
Direction from well? NVRHAST How many feet?						
ı	FROM TO	PLUGGING MATERIALS				
	0 3 CM	1PAMES 50116				
	3 74.5 BU	WUNITE CHIPS				
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) by (signature)					
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.						