1 LOCATION	OF WATER W	ELL:	Fraction	Section Number	Township Number	Range Number	
County:	EDAWI	-C.K	NE 1/4 NE 1/45 W1/4	35	<i>T</i> スフ 5	RIE	
Distance and direction from pagest town or city street address of well if located within City?							
DACK 49 - d - east tence - 3306 E Mt Wernon  2 WATER WELL OWNER: Sue Harrington; And Sch-field  RR#, St. Address, Box #: 1094 Grand Prix Dr.  City, State, ZIP Code: St. Charles MO 63303 Application Number: United Schools							
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  N  WELL'S STATIC WATER LEVEL							
N V	, X	-N E	WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Sup 6 Oil Field Water Zawn and Garden 8 Air Conditioning	Supply 10 Monitoring 11 Injection 12 Other	g Well Well	
S 1	S W S E 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 below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile  Blank casing diameterin. Was casing pulled? Yes No If yes, how much. Z.5 Casing height above or below and surfacein.							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement group 3 Bentonite 4 Other							
Grout Plug Intervals: Fromft. toft., Fromft. toft., From toft.							
What is the nearest source of possible contamination:  1 Septic tank 6 Seepage pit 11 Fuel storage 2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well? How many feet?							
FROM	TO 0	PLI	UGGING MATERIALS				
2.5	0	100	501/				
6	2.5	Soil	1((lay)				
18	12	Sand	Bleach				
			-				
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. 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.							