			·				
1 LOCAT	TION OF WATE	R WELL:	Fraction	Section Number	Township Number	Range Number	
County: Delanch			NWANW4NW4	18	ユフ	IF	
Distance and direction from nearest town or city street address of well it located within city?							
2 WATER	WELLOWNE	B: JUD)	Heaven 1	0 6720	3		
	Address, Box e, ZIP Code	#: 137 : Wi			Division of Water Resource	s •	
-	WELL'S LOCA	TION WITH	4 DEPTH OF WELL				
WELL'S STATIC WATER LEVEL							
V ₃			WELL WAS USED AS:				
A							
	w —	N E	1 Domestic	5 Public Water Supp	ly 9 Dewat	ering	
			2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well				
w		— =	3 Feedlot 4 Industrial	Domestic (Lawn & 8 Air Conditioning		on Well	
			4 ilidustilai	6 All Conditioning	12 Other		
Was a chemical / bacteriological sample submitted to Department?Yes							
If yes, mo/day/yr sample was submitted							
	Water Well Disinfected: Yes No. Y						
	S		Water Well Distillected.	165			
5 TYPE OF BLANK CASING USED:							
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile							
Blank casing diameter5 in. Was casing willed? Yes No							
6 GROUT PLUG MATERIAL: 1 Neat cement							
Grout Plug Intervals: From							
What is the nearest source of possible contamination:							
1 Septic tank			6 Seepage pit	11 Fuel storage	16 Other (sp	accify holow)	
2 Sewer lines			7 Pit privy	12 Fertilizer storage			
3 Watertight sewer lines			8 Sewage lagoon	13 Insecticide stora			
4 Lateral lines			9 Feedyard	14 Abandoned water			
5 Cess Pool			191 ivestock pens	15 Oil well/Gas well			
Direction from well?							
FROM TO PLU		GGING MATERIALS	· N/				
3.5	11	X	1 + Rock F				
•							
11	0	ans	st groul		•		
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							
1		_	business name of	Jandon J.	my T W.	~~	
by (signature)							
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct							

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.