1	LOCATION OF	WATER WELL:	T	Fraction	Sectio	n Number	Township	Number	Range Number	
County: Scdgwick			1	1W45W45E4		4	27	5	1 E	
Distance and direction from nearest town or city street address of well if located within city?										
1210 N of Sixcorner of Classo property of of 2/31 st.										
2	water well owner: E/paso me rehant Energy Refroleum Co.									
	RR #, St. Address, Box #: Z M . Ne va da Board of Agriculture, Division of Water Resources City, State, ZIP Code : Colo rado Spring 5, Co 80903 Application Number:									
3		LOCATION WITH		DEPTH OF WELL	48	ft				
	AN "X" IN SECTION BOX:			WELL'S STATIC WATER LEVEL 13. 4. ft.						
		N W N E		WELL WAS USED AS:						
	n'w			1 Domestic 5 Public Water Supply 9 Dewatering						
	1			2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well						
W		:	E	3 Feedlot 4 Industrial		omestic (Lawn & Air Conditioning	& Garden)		on Well	
	S WS E			Was a chemical / bacteriological sample submitted to Department?Yes						
				If yes, mo/day/yr sample was submitted						
				Water Well Disinfected:	Yes	No				
		S								
5	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									
	2									
Blank casing diameter										
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout Plug Intervals: From 36.8ft. to 3 ft., From ft. to ft., From ft., From to ft.										
What is the nearest source of possible contamination:										
	1 Septic tar	nk		6 Seepage pit					ecify below)	
2 Sewer lines3 Watertight sewer lines				7 Pit privy8 Sewage lagoon		Fertilizer storag		•••••		
4 Lateral lines				9 Feedyard		Abandoned wat	•			
5 Cess Pool			,	10 Livestock pens		Oil well/Gas we				
Direction from well? East How many feet? Various										
FROM TO PLUC			LUG	GING MATERIALS						
34.8 3 Near		a f	Cement							
3 0 700		5	54.1							
		10/	_						1	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed										
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) under the business name of Charles Ch										
by (signature) under the business name of by (Signature)										
	by (signature)				.u.c.jC.jC.	and the				
11	NSTRUCTIONS:	Use typewriter or	r ball	point pen. Please press f	rmly and	print clearly. Ple	ase fill in blar	nks, underlir	ne or circle the correct	
a Te	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.									