1 LOCATI	ON OF WATE	R WELL:	Fraction	Section Number	Township Number	Range Number	
County:	Neosho		NW1/4 SW 1/4 SW 1/4	30	27	ع 19	
Distance and direction from nearest town or city street address of well if located within city? 4 miles east of Chanute, KS and 1½ mile south							
2 UATER UELL CUNER: Clenn D. Barnbart, Harold E. Barnbart C. Loic A. Dabrook							
RR#, St.	RR#, St. Address, Box #: City State 710 Sede : Barmart & Lors A. Babcock Board of Agriculture, Division of Water Resources Application Numbers						
City, Sta	Application Number:						
	RK WELL'S LOCATION WITH 4 DEPTH OF WELL						
				WELL WAS USED AS:			
	. <u> </u>	N E	①Domestic	5 Public Water Sup	ply 9 Dewaterin	a	
			2 Irrigation 3 Feedlot		Supply 10 Monitorin	g Well	
w	 		4 Industrial		12 Other		
x-s	S W S E Was a chemical/bacteriological sample submitted to Department? YesNo.2 If yes, mo/day/yr sample was submitted						
			Water Well Disinfect	ted: Yes.X No			
S							
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 muchin.							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: Fromft. toft., Fromft. toft., From							
What is the nearest source of possible contamination:							
OSeptic tank 6 Seepage pit 11 Fuel storage 16 Other (specify 2 Sewer lines 7 Pit privy 12 Fertilizer storage						•	
3 Watertight sewer lines			8 Sewage lagoon	12 Fertilizer storag 13 Insecticide storag	age		
4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well?							
FROM	то	PLU	GGING MATERIALS				
-		Bleach	1 gal				
22'	6'	Grave1_					
6'	5'	Concret	e				
5'	0'	Clay					
			** ***********************************				
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
by (signature) Illum (Daviness							

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.