

1	LOCATION OF WATER WELL:	Fraction County: BUTLER	SW 1/4	SE 1/4	Section Number 20	Township Number 21	Range Number 3 E																											
Distance and direction from nearest town or city street address of well if located within city? 335 McCANLESS																																		
2	WATER WELL OWNER:	W.J. COMBS		Board of Agriculture, Division of Water Resources Application Number:																														
RR#, St. Address, Box #: City, State, ZIP Code :		335 McCANLESS ANDOVER KS 67002																																
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N			4	DEPTH OF WELL..... 45ft.																													
				WELL'S STATIC WATER LEVEL..... 14ft.																														
WELL WAS USED AS:																																		
<table border="0"> <tr> <td><input checked="" type="radio"/> Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input type="radio"/> Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td><input type="radio"/> Feedlot</td> <td>7 Lawn and Garden Only</td> <td>11 Injection Well</td> </tr> <tr> <td><input type="radio"/> Industrial</td> <td>8 Air Conditioning</td> <td>12 Other.....</td> </tr> </table>								<input checked="" type="radio"/> Domestic	5 Public Water Supply	9 Dewatering	<input type="radio"/> Irrigation	6 Oil Field Water Supply	10 Monitoring Well	<input type="radio"/> Feedlot	7 Lawn and Garden Only	11 Injection Well	<input type="radio"/> Industrial	8 Air Conditioning	12 Other.....															
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Was a chemical/bacteriological sample submitted to Department? Yes....No.... X If yes, mo/day/yr sample was submitted.....																																		
Water Well Disinfected: Yes..... X No.....																																		
5	TYPE OF BLANK CASING USED:																																	
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Blank casing diameter..... 6in. Was casing pulled? Yes..... No..... X If yes, how much.....																																		
Casing height above or below land surface..... 36in. Below																																		
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....																																	
Grout Plug Intervals: From..... 14ft. to..... 5ft., From.....ft. toft., From..... to.....ft.																																		
What is the nearest source of possible contamination:																																		
<table border="0"> <tr> <td><input checked="" type="radio"/> 1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td><input checked="" type="radio"/> 2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td>.....</td> </tr> <tr> <td><input type="radio"/> 3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td>.....</td> </tr> <tr> <td><input type="radio"/> 4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td>.....</td> </tr> <tr> <td><input type="radio"/> 5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td>.....</td> </tr> </table>								<input checked="" type="radio"/> 1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	<input checked="" type="radio"/> 2 Sewer lines	7 Pit privy	12 Fertilizer storage	<input type="radio"/> 3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	<input type="radio"/> 4 Lateral lines	9 Feedyard	14 Abandoned water well	<input type="radio"/> 5 Cess Pool	10 Livestock pens	15 Oil well/Gas well							
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Direction from well? NE East How many feet? 65'																																		
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7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)..... 10-10-95 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 by (signature) W.J. COMBS an N.E.A.																																	