| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
|---|---|---|---|---|
| County: Crawford | NE 1/4 SE1/4 SW1/4 | 4 | 28 | 25E |
| Distance and direction from near $2-1/4$ miles N | est town or city street orth of Mulber | | located within city? | |
| 2 WATER WELL OWNER: Clemen | | | -HR-303 | |
| ∟ KDHE B | ureau of Envir | conmental Rem | nediation | |
| RR#, St. Address, Box #Surfa City, State, ZIP Code :4033 | ce Mining SEct | ion Board of Agric Application Nu Frontenac K | culture, Division of N umber: KS 66763 | later Resources |
| 3 MARK WELL'S LOCATION WITH | 4 DEPTH OF WELL | 9.QQ | ft. | |
| AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL23.0ft. | | | | |
| | WELL WAS USED AS: | | | |
| N W N E | 1 Domestic | 5 Public Water Sup | ply 9 Dewaterin Supply 10 Monitorin | 9 |
| | 2 Irrigation 3 Feedlot | 6 Oil Field Water 5 | Supply 10 Monitoring Only 11 Injection | j Well Well |
| W E | | | x ¹² Other | ••••• |
| | | Coal Mine well for wash plant | | |
| S W X S E | Was a chemical/bacteriological sample submitted to Department? YesNo.X. If yes, mo/day/yr sample was submitted | | | |
| s | Water Well Disinfected: Yes No.X | | | |
| 5 TYPE OF BLANK CASING USED: | | | | |
| X 1 Steel 3 RMP (SR) 5 Wrot | ught 7 Fibers | glass 9 Other | (specify below) | |
| 2 PVC 4 ABS 6 Asbe | | | No If yes how i | much |
| Casing height above or below | land surface | in. | | |
| 6 GROUT PLUG MATERIAL: X1 Neat | | | | |
| | 900.ft. to3ft | | oft., From | toft. |
| What is the nearest source of | • | 1: | | |
| 1 Septic tank | 6 Seepage pit | 11 Fuel storage 12 Fertilizer storage | 16 Other (sp | ecify below) |
| <pre>2 Sewer lines 3 Watertight sewer lines</pre> | / Pit privy | 12 Fertilizer storag | | KIIOWII |
| 4 Lateral lines 9 Feedyard 14 Abandoned water well | | | | |
| 5 Cess Pool | 10 Livestock pens | 15 Oil well/Gas well | | |
| Direction from well? | JGGING MATERIALS | How many feet? | • | |
| | OGGING MATERIALS | | | |
| 900' 3' Neat | cement | | | |
| | | | | |
| | | | | |
| | | _ | | |
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| | | | | |
| _ | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S ON (mo/day/year) | nse No 29.l under the business name | This Water Well e of K-W.Qil.W | nder my jurisdiction a st of my knowledge and Record was completed ell Serv. Inc | and was completed d belief. Kansas on (mo/day/year) |
| by (signature) | J. | im Kepley | | |
| INSTRUCTIONS: Use typewriter of underline or circle the correct | r ball point pen. Pleas answers. Send top thr | ee copies to Kansas I | Department of Health | and Environment, |

one for your records.