1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
county Edgwick	5E1/4NE1/4NE1/4	18	295	1E
Distance and direction from nearest town or city street address of well if located within city?				
2 WATER WELL OWNER: () OF MY R () 85540				
RR#, St. Address, Box #: 8931 5, Sen eca City, State, ZIP Code: Wichita, K5, 67233 Board of Agriculture, Division of Water Resources Application Number:				
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL				
N W N E	3 Feedlot	1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well		
S W S E	If yes, mo/day/yr sa	eriological sample su ample was submitted ted: Yes No.	/	t? YesNo.!
S	water wett brannet			
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 NoX. If yes, how much				
Grout Plug Intervals: From. 15ft. toft., Fromft. toft., From				
Grout Plug Intervals: From. 72ft. toft., Fromft. toft., From toft. What is the nearest source of possible contamination:				
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool	6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard		age well	ecify below)
FROM TO P	LUGGING MATERIALS			
45 3 Gick crave				
3 0 Compacied Soil				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)				
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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.

Inspected by Susan E, Bessey and Oker 12-12-97