1 LOCATIO	ON OF WATER	R WELL:	Fraction	Section Number	Township Number	Range Number	
County:	Cowle	1)	SE1/4SE1/4 SW/		32	04	
Distance and direction from nearest town or city street address of well if located within city?							
28 miles North Company of Winfield							
2 WATER WELL OWNER: Jack Sowile RR#, St. Address, Box #: PC Box 480 Board of Agriculture, Division of Water Resources							
City, State, ZIP Code: Wunfield, KS 67156 Application Number:							
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL							
N WELL'S STATIC WATER LEVEL							
WELL WAS USED AS:							
N N	W	N E	1 Domestic 2 Irrigation	5 Public Water Sup 6 Oil Field Water	l Field Water Supply 10 Monitoring Well		
w			3 Feedlot E 4 Industrial	7 Lawn and Garden 8 Air Conditioning	Only 11 Injection 12 Other		
						~	
	S'W————————————————————————————————————						
Water Well Disinfected: Yes No							
S I TABLE OF BLANK GASTING HOLD.							
5 TYPE OF BLANK CASING USED: Hand Dug							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other specify below) Rock.							
Blank casing diameter							
Casing height above or below land surfacein. 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: Fromft. toft., Fromft. toft., From toft.							
What is the nearest source of possible contamination:							
T Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage						ectry below)	
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 14 Abandoned water well							
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well How many feet?							
FROM	70	PL(JGGING MATERIALS				
0	31	Tops	201 (
3'	3.5	binto	rite plug				
3.5	ار ح	sand	(washed)		And the second s	ette mag	
					**	Ar wet	
					27 2 4 2	1004	
					A Secretary Control	S Jahren Jang Jangar Jangar	
7 CONTRACTOR'S OR ANDOWNER'S CERTIFICATION This water well was plugged under my jurisdiction and was completed							
on (mo/day/year)09./1.7.64 and this record is true to the best of my knowledge and belief. Kansas							
by (signature)							
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.							