ID NO.\_

1	LOCATION OF WATER WELL:				Fraction	Section Number		Township Numb	er Range	Nu	mber	
Co	County: Cherokee				NW 14 NW 14 SW 14	18		33		24 <sub>©W</sub>		
Distance and direction from nearest town or city street address of well if located within city?												
101 South East Avenue, Columbus, KS												
2												
		t. Address, Bote, ZIP Code	UA II.		th Cherokee Street Board of Agriculture, Division of Water Resources Application Number:							
3			CATION WITH		4 DEPTH OF WELL							
	AN "X" IN SECTION BOX:				WELL'S STATIC WATER LEVEL 3.56 ft.							
		- Î		]	WELL WAS USED AS:							
	NW	,——	NE		1 Domestic	5 Public Wat		9 Dew				
					<ul><li>2 Irrigation</li><li>3 Feedlot</li></ul>		6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 11 Injection Well					
W	X			E	4 Industrial	8 Air Condition	•		r			
SE SE Was a chemical / bacteriological sample submitted to Department? Yes								NoX				
	If yes, mo/day/yr sample was submitted											
		S		,	water well disinfected: Ye	es No	·····					
5	5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)												
②PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile  Blank casing diameter2 in. Was casing pulled? Yes												
Casing height above or below land surface												
6	GROU'	T PLUG MAT	ERIAL:	1 Ne	at cement 2 Cement gro	ut 3Bentonite	4 C	Other			ïo	
Grout Plug Intervals: From												
		the nearest	source of poss	sible	contamination: 6 Seepage pit	(1) Fuel store	200	16 Other	(specify below)			
2 Sewer lines 3 Watertight sewer lines					7 Pit privy 8 Sewage lagoon	12 Fertilizer	12 Fertilizer storage					
4 Lateral lines					9 Feedyard	14 Abandon	14 Abandoned water well 15 Oil well/Gas well					
5 Cess pool					10 Livestock pens							
Direction from well? How many feet?												
FROM TO PLU			GGING MATERIALS									
	0 0.5 Concrete			е								
	0.5 3 Silty Clay/0			ıy/C	Bravel							
	3	10	Bentoni	te								
7	CONT	RACTOR'S	OF LANDOY	YNE	R'S CERTIFICATION: This	water well was	plugged	under my jurisdiction	n and was co	mplet	ed on	
(mo/day/year)6/22/2010and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No708This Water Well Record was completed on (mo/day/year)712/2010												
by (signature)												
IN			<u> </u>		/							
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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.												
St.	. Ste. 420	, торека. К	ansas 66612	:-136	or. Telephone: 785/296-55	22. Send one to	water W	ell Owner and retain	one for your	record	S.	