1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number	
county: Washington			SE 1/4 NW1/4 NE 1/4	10	3	5	
Distance and direction from nearest town or city street address of well if located within city?  I mile east and 5/4 miles south of Hanover, Ks							
2 WATER WELL OWNER: Wesley Bruna							
RR#, St. Address, Box #: 308 E. Elm Sf City, State, ZIP Code: Hanover, KS 66945 Application Number:							
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL							
			WELL WAS USED AS:				
  N 	w	×   E	1 Domestic 2 Irrigation 3 Feedlot	5 Public Water Sup 6 Oil Field Water 7 Lawn and Garden	ply 9 Dewaterin Supply 10 Monitorin Only 11 Injection		
w			E 4 Industrial				
s	S W S E Was a chemical/bacteriological sample submitted to Department? Yes						
Water Well Disinfected: Yes No							
5 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 No If yes, how muchin.  Casing height above or below land surfacein.							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From $3$ .ft. to $4$ ft., Fromft. toft., From toft.							
What is the nearest source of possible contamination:							
4 Lateral lines			6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	14 Abandoned Water	well	ecify below) L.Knawa	
Direction from well? How many feet?							
FROM	то	PL	UGGING MATERIALS				
0	3	Top	asoi l				
3	6	Ben	tonite				
6	61	Clay	•				
61	103	Chlo	rinated Sand				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed							
water Well Contractor's License No.  under the business name of  by (signature)  Contractor's License No.  Li							
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle							

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: 785/296-3565. Send one to Water Well Owner and retain one for your records.