1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Jackson	NW ^{1/4} NW ^{1/4} NW ^{1/4}	35	85	15E
Distance and direction from nearest town or city street address of well if located within city?				
1½miles south of Mayetta 2 WATER WELLOWNER: MAX Jantz Excavation				
26503 Eleven Rd				
RR #, St. Address, Box #: Montezuma, Ks. 67867 City, State, ZIP Code: Board of Agriculture, Division of Water Resources Application Number:				
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	H	3 ft.		
N N		1 LEVELQ 10.		
N W	WELL WAS USED AS:			
N W	1 Domestic 2 Irrigation	5 Public Water Supp6 Oil Field Water Su	•	tering oring Well
W E	3 Feedlot 4 Industrial	7 Domestic (Lawn & 8 Air Conditioning		on Well
		•		••
S W S E Was a chemical / bacteriological sample submitted to Department? Yes				
Water Well Disinfected: YesX No				
S				
TYPE OF BLANK CASING USED: rock lines				
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 diameter in. Was casing pulled? Yes No If yes, how much in.				
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
Grout Plug Intervals: From15ft. to8 ft., From ft., From ft., From ft.				
What is the nearest source of possible contamination:				
1 Septic tank 2 Sewer lines	6 Seepage pit 7 Pit privy	11 Fuel storage 12 Fertilizer storag		pecify below) di.t.ch
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide store	age	
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned wate15 Oil well/Gas well		
Direction from well?west				
FROM TO PLUG	GGING MATERIALS			
$1\frac{1}{2}$ 8 bentonit	е			
8 28 fill san				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)				
on (mo/day/year)1 = 31 = 06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No				
Water Well Contractor's License No. 182 This Water Well Record was completed on (mo/day/year)				
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, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.				