ID NO. _

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Jackson	NW 14 NW 14 NW 14	35	88	15E
Distance and direction from nearest town or $1\frac{1}{2}$ miles south of	•	ocated within city?		
2 WATER WELLOWNER: Max Jan RR #, St. Address, Box #: City, State, ZIP Code : Montezi	Board of Agriculture, Division of Water Resources Application Number:			
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N N N N N E S S TYPE OF BLANK CASING LISED:	WELL'S STATIC WATER WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial Was a chemical / bacter If yes, mo/day/yr samp Water Well Disinfected:		pply 10 Monito Garden) 11 Injectio 12 Other d to Department?Yes	oring Well on Well
TYPE OF BLANK CASING USED: rock lined hand dug well				
2 PVC 4 ABS 6 As Blank casing diameterin. Casing height above or below land s 6 GROUT PLUG MATERIAL: 1 Ne	eat cement 2 Cement gro 1 1/2 ft. to 8 ft ble contamination: 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	Yes No in. 3 Bentonite 4 C	If yes, how months of the second of the seco	to ft.
FROM TO PLUG	GGING MATERIALS			
1½8 bentoni 8 28 fill sa				
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. <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.				