1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Ellis		E1/4 NE/4 NW/4	25	125	19W
Distance and directi	on from neare	est town or city street N 33/4 Rupp	t address of well if	located within city?	
2 WATER WELL OWNER:	BArb	Rupp			
RR#, St. Address, Bo City, State, ZIP Cod	ox #: 125 T	Locust Clos	Board of Agric	culture, Division of N umber:	later Resources
MARK WELL'S LOCAT AN "X" IN SECTION N	ION WITH	4 DEPTH OF WELL	2.0 ER LEVEL	ft.	
X		WELL WAS USED AS:			
N'W	-N'E	1 <u>Domestic</u> 2 Irrigation 3 Feedlot 4 Industrial	7 Lawn and Garden	Supply 10 Monitoring Only 11 Injection	g Well Well
S W S E Was a chemical/bacteriological sample submitted to Department? YesNo If yes, mo/day/yr sample was submitted					
Water Well Disinfected: YesX No					
5 TYPE OF BLANK CAS	ING USED:	1			
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 diam	neter	in. Was casing p	oulled? Yes 1	NoX. If yes, how m	nuch
Blank casing diameterin. Was casing pulled? Yes NoX. If yes, how much					
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
What is the nearest source of possible contamination:					
2 Sewer lines 3 Watertight sewer lines 4 Lateral lines		6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard	11 Fuel storage	well	cify below)
Direction from well? How many feet?					
FROM TO	PLUG	GING MATERIALS			
20 0	Ben	tonite			
			_		
ONTRACTOR'S OR LAND ON (mo/day/year). Water Well Contraction (March 1) (March 2) (Marc	ctor's Licens	RTIFICATION:This water O.O and this recor e No. (42.4	well was plugged urd is true to the bes. This Water Weller of Town W.S.	nder my jurisdiction a st of my knowledge and Record was completed	nd was completed belief. Kansas on (mo/day/year)
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks,					

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.