			·				
1 LOCATION OF WATER WELL:			Fraction NW	Section Number	Township Number	Range Number	
County: Ellis			1/4 1/4 (1/4)	30	13	12 W	
Distance and direction from nearest town or city street address of well if located within city?							
2 WATER WELL OWNER:							
RR#, St. Address, Box #: City, State, ZIP Code: Board of Agriculture, Division of Water Resources Application Number:							
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL							
₩ AN "X"	' IN SECTION	ON BOX:	WELL'S STATIC WATER LEVELft.				
	1		WELL WAS USED AS:				
N	'×	N E	1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Lawn and Garden Only 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other				
W			E 4 Industrial	8 Air Conditioning	12 Other		
	W	s E	Was a chemical/bacteriological sample submitted to Department? YesNo				
			Water Well Disinfected: Yes No				
S							
5 TYPE OF BLANK CASING USED:							
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.X. If yes, how much							
Casing height above or (elo) land surface30in.							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From. 0 .ft. to. 3 ft., Fromft. toft., From toft.							
What is the nearest source of possible contamination:							
1)Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)							
Z Se	wer lines	17	7 Pit privy	7 Pit privy 12 Fertilizer storage			
	tertight s teral line	ewer lines s	8 Sewage lagoon 13 Insecticide storage 9 Feedyard 14 Abandoned water well				
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well? $S.W$							
FROM TO PLUGGING MATERIALS							
28' 22' Sand			achlorine				
221	30	Sulu	'I				
33'	0	Subso		_			
6'	30"	BEN I	onite.				
30"	0'	50ì					
	. , .						
		.,					
on (mo/day/year) 10-12-2002 and this record is true to the best of my knowledge and belief. Kansas							
Water Well Contractor's License No							
by (signature)							
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: 913/296-3565. Send one to Water Well Owner and retain							
one for your records.							