1 LOCATION OF WATER WELL: Fraction				Section Number	Township	Number	Range Number	
County: 7	Tread	,	NE1/4NN1/4NW1/4	15	/3	5	21 W	
Distance and direction from nearest town or city street address of well if located within city? 12 Miles East, 7 Miles Sand & East of Wakeeney								
2 WATER WELL OWNER: Marvin Kupp								
RR#, St. Address, Box #: P.O. Box 404 City, State, ZIP Code: Hay 5, K 5 67601 Board of Agriculture, Division of Water Resources Application Number:								
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL								
X			WELL WAS USED AS:					
w		-N E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial		Supply 10 Only 11	Injection	g Well	
Was a chemical/bacteriological sample submitted to Department? YesNo.X. If yes, mo/day/yr sample was submitted								
Water Well Disinfected: Yes. X 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 diameter								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Plug Intervals: From3ft. to6ft., Fromft. toft., From toft.								
What is the nearest source of possible contamination:								
4 Lateral lines 9 Feedyard 14 5 Cess Pool 10 Livestock pens 15				12 Fertilizer stora 13 Insecticide stora 14 Abandoned water 15 Oil well/Gas wel	Fertilizer storage Insecticide storage Abandoned water well Oil well/Gas well			
Direction from well?								
FROM	то	PLU	GGING MATERIALS					
0	3	TOP 501						
3	6	011	ute Plug					
	21.5	Clay	,					
		Disinfec	ted Sand					
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year). June. 12.1998 and this second is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No								
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,								

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.