CORRECTION(S) TO WATER WEI (to rectify lacking or incorrec	,
, , ,	County: <u>Saline</u>
Location listed as:	
Section-Township-Range: 27-/3-5W	27-135-5W
Section-Township-Range: 27-/3-5W Fraction (1/4 1/4 1/4): None Given	SW SW NW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Written & legal descrip Culver 1:24,000 topo. ma	stions, and
- Carrer 1- 21,000 ropu. ma	initials: RL date: 10/18/2004
submitted by: Kansas Geological Survey, Data Resources Library, 1930 C to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jac	

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1	LOCAT	TION OF WAT	ER WELL:		Fraction	Section	n Number	Township	Number	Range Number	
C	ounty:	5,1	, , , , 		1/4 1/4 1/4		27	13		(1)	
Distance and direction from nearest town or city street address of well if located within city? In GIENDAIE, KS NORTH OF BRIDGE ON EAST SIDE											
2	WATER	WELLOWNE	B: Sta	٤ ک	- GENTUR MILL	Q,					
H	WATER WELLOWNER: STENE & CRUENA MILLE RR #, St. Address, Box #: C/O Systems 4 400 N, SANTA FE Board of Agriculture, Division of Water Resources City, State, ZIP Code : SALINA, KI 67401 Application Number:										
3	MARK	WELL'S LOCA		~ ~	4 DEPTH OF WELL	48	ft				
۲	AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL ft.										
	رلانہ				WELL WAS USED AS:						
	N N	w —	— N E ——		1 Domestic	5 F	Public Water Supp	ly	9 Dewat	ering	
					2 Irrigation 3 Feedlot		Dil Field Water Su			ring Well on Well	
w				E	4 Industrial		Domestic (Lawn & Air Conditioning	•			
	s	w —	— S E ——		Was a chemical / bacter If yes, mo/day/yr samp				ent?Yes	No <u></u>	
						ر ،					
		S		l	Water Well Disinfected:	Yes	. No				
5	TYPE	OF BLANK CA	ASING USED:		Construction						
	1 Stee 2 PV		MP (SR) 5	Wı	ought 7 Fiberg	lass	9 Other (Specify	below) 5+	v RE NE	,	
			eter5		Was casing pulled?			_ 4 /		uch	
L,					surface	in.		,			
6		Γ PLUG MAT Plug Interval			at cement 2 Cement gro		Bentonite 4 C			to	
	What i	s the neares	at source of p	ossil	ble contamination:			·			
1 Septic tank					6 Seepage pit	11	Fuel storage	16	Other (sp	ecify below)	
	2 Sewer lines				7 Pit privy		Fertilizer storage				
3 Watertight sewer lines 4 Lateral lines				8 Sewage lagoon9 Feedyard	13 Insecticide storage14 Abandoned water well						
		ess Pool		a. 1	10 Livestock pens		Oil well/Gas well				
	Direct	tion from we	ارم <u>کو بر</u>	T C	How man	y feet?	70'				
F	ROM	то	F	PLUC	GGING MATERIALS						
0 4 CRAW			S	PACE		11/	11	CRALL	SDACE		
	4	49	Bento	ارا	4 Plug		WE	,11 /15	Croww		
							WE 4 ft De 04	own or	s EA	st SIDE	
							of	House			
_							•				
					W						
7	CONTR	RACTOR'S	OR LANDON	WNE	R'S CERTIFICATION: Th	is water	well was plugge	d under my j	urisdiction	and was completed	
Γ	on (mo/day/year)										
	by (sign	nature)	nike &	L	business name of	E.T.ER	2 Dr.J1-1 6.1</td <td>YATIO~</td> <td></td> <td></td>	YATIO~			
IN	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										

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.