Н	ON OF WATE		Fraction		Section Number	Townshi	p Number	Range Number
County: 2	INCOLI	V, Co.	1W14 NW 14	1/4	9		/3	07
			est town or city	street	address of well if	located w	ithin city?	
2 WATER WILL COMED Co. 1 72 T.								
WATER WELL OWNER: CECIL VON FANGE DB# St Address Box #: RR2 Box 81 Board of Agriculture Division of Nator Recourses								
RR#, St. Address, Box #: City, State, ZIP Code : Lincoln Kansas Board of Agriculture, Division of Water Resources Application Number:								
	ELL'S LOCA IN SECTIO		4 DEPTH OF WELLft.					
AN "X"	IN SECTIO	N BOX:	WELL'S STATIC WATER LEVELft.					
WELL WAS USED AS:								
× ×	W	N E	D omest	ic	5 Public Water Supp		9 Dewaterin	ıg
			2 Irriga	tion	6 Oil Field Water 9 7 Lawn and Garden 0	Supply 1 Only 1	<pre>0 Monitorin 1 Injection</pre>	
w		 E	4 Indust		B Air Conditioning		2 Other	
		S E	lles	1 /h	iologiaal as-ala as	د د د د د اسمان	. Dan-st	Van 11:-
S W————————————————————————————————————								
Water Well Disinfected: Yes. X No								
S								
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 diameter5.5in. Was casing pulled? Yes. X No If yes, how much4								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Plug Intervals: From. #5.ft. to. 30.ft., From. 30.ft. to #ft., From. 4. to. 9ft.								
What is the nearest source of possible contamination:								
1 Sep	otic tank		6 Seepage pit	l Fuel storage	1	6 Other (sp	ecify below)	
2 Sei	wer lines tertight s	ewer lines	7 Pit privy 8 Sewage lagoon	Fertilizer storage				
2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well								
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well								
Direction from well?								
FROM	ТО	PLUG	GING MATERIALS		_			
40	30	S#	<u>v D</u>					
30	4	BEN	TONITE					
4	0	TOP	Soil					
		/						
				Average value				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:This water well was plugged under my jurisdiction and was completed								
on (mo/day/year)								
on (mo/day/year)								
by (signature)								
		CADOMESTOR OF	Dall DOINT DAN	PIGOCO	DEACH TIPMIV and P	TIDE CLAS	CIV DICES	a till in blanka

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.