1 LOCATION OF WATER	R WELL:	Fraction	Section Number	Township Number	Range Number	
County: SALINE		S 1/4 NE 1/4 SE 1/4	25	14	1	
Distance and direct	ion from near	rest town or city stree	t address of well if	located within city	?	
WATER WELL OWNER RR#, St. Address, Bo	ox #: 2208	S SOLOMON RD	Board of Agric	culture, Division of umber:	Water Resources	
3 MARK WELL'S LOCA AN "X" IN SECTION		<b> </b>	L ER LEVEL22			
N W		4 Industrial	5 Public Water Sup 6 Oil Field Water S 7 Lawn and Garden G 8 Air Conditioning	Supply 10 Monitori Only 11 Injectio 12 Other	ng Well in Well I.U.E.S.T.O.C.K.	
S		If yes, mo/day/yr sa	ample was submitted. ted: Yes $X$ . No	••••••		
TYPE OF BLANK CAS	SING USED:					
1 Steel 3 RMP   2 PVC 4 ABS	-		glass 9 Other e	(specify below)		
Blank casing dia Casing height abo	meter ove or below	in. Was casing p	oulled? Yes!	No If yes, how	much	
6 GROUT PLUG MATER	IAL: 1 Neat	cement 2 Cement grou	ut 3 Bentonite	4 Other		
Grout Plug Inter	vals: From	n. <b>4</b> 5.ft. to5ft.	., Fromft. to	oft., From	toft.	
What is the near	est source of	f possible contamination	n:			
2 Sewer times 7 Pit privy 12 3 Watertight sewer lines 8 Sewage lagoon 13 4 Lateral line 9 Feedyard 14			11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water w 15 Oil well/Gas well	ge age well	pecify below)	
Direction from we	ell? Ea.	st	How many feet? 9	350'		
FROM TO	PLUGGING MATERIALS					
0 4.5	TOP SOI		-	KE	CEIVE	
4.5 5	BENTONITE					
5 22	SUB SOIL			J	UE 2 1 1997	
22 31	SAND			BURE	AU OF WATE	
7 CONTRACTOR'S OR L on (mo/day/year)? Water Well Contra	actor's Licer	ERTIFICATION:This water and this recor	This Water Well	Record was complete	d on (mo/day/year)	
by (signature) 🛪	Your a	under the business name	• от		• • • • • • • • • • • • • • • • • • • •	
NSTRUCTIONS: Use 1	ypewriter or	ball point pen. Pleas	se press firmly and p	orint clearly. Plea	se 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.