						110077	
1 LOCATION	ON OF WATE	R WELL:	Fraction	Section Number	Township Number	Range Number	
County: Ellsworth		NW 1/4 SE 1/4 SW 1/4	18	14	10		
Distance and direction from nearest town or city street address of well if located within city? Approximately 180' East & 40' North of intersection of 24th and H Street.							
2 WATER WELL OWNER: Todd Heitschmidt							
RR#, St. Address, Box #: P.O. Box 219 City, State, ZIP Code : Holyrood, KS 67450 Board of Agriculture, Division of Water Resources Application Number:							
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL							
WELL WAS USED AS:							
w	W	—N E	Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Supp 6 Oil Field Water 9 7 Lawn and Garden 0 8 Air Conditioning	Supply 10 Monitoria Only 11 Injection	ng Well	
s	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 Galvanized							
Blank casing diameter							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: Fromft. toft., Fromft. toft., From toft.							
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage							
Direction from well?South How many feet?40							
FROM	TO		GGING MATERIALS				
45	23	Chlorin	ated Sand				
23	10	Subsoil					
10	3	Bentoni					
3	0	Topsoil					
-							
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
INCIDICATIONS: Her symptotics on held point man. Discontance firmly and mint clearly. Discontill in blank							

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.