1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
」 County: Ellis	NE 1/4 NE 1/4 NE 1/4	10	14	18 ( )
Distance and direction from ne	arest town or city stree	t address of well if		
2100 E. Hwy 40 Ha	ys, Kansas t Tobacco and Can	dy Company		· <del></del>
	Box 759		culture, Division of S	Hator Recources
	s, Kansas 67601	Application N	-	water kesources
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL WELL'S STATIC WAT	65 ER LEVEL 45		
Х	WELL WAS USED AS:			
W N E	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial		Supply 10 Monitorin Only 11 Injection	g Well
S W S E	If yes, mo/day/yr s	ample was submitted.		t? YesNo.※
S	Water Well Disinfec	ted: Yes.X No	••••	
TYPE OF BLANK CASING USED:	1			
		glass 9 Other ete Tile	(specify below)	
Blank casing diameter5 Casing height above or below	in. Was casing was land surface	pulled? Yes I	No.X If yes, how	much
GROUT PLUG MATERIAL: 1 Nea	t cement 2 Cement gro	ut <u>3 Bentonite</u>	4 Other	
Grout Plug Intervals: Fro	om.45ft. to0ft	., Fromft. to	oft., From	toft.
What is the nearest source	of possible contamination	<sub>n:</sub> Already dete	ected	
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool	6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water of 15 Oil well/Gas wel	age well	ecify below)
Direction from well?		How many feet?	• • • • • • • • • • • • • • • • • • • •	
FROM TO PI	LUGGING MATERIALS			
65 45 Gravel				
45 0 Expandi	ng Bentonite seal			
7	appropriate the second			
on (mo/day/year)  Water Well Contractor's Lice by (signature)	CERTIFICATION: This wate and this reco	r well was plugged u rd is true to the be This Water Well e of <u>Karst Wate</u>	nder my jurisdiction s st of my knowledge an Record was completed er Well Drilling	and was completed belief. Kansas on (mo/day/year)

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.