1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Soleno	3W18W1/4SW14	28	148	2W
Distance and direction from ne 2313 Holm (AR) R 2 WATER WELL OWNER: MYTH	d Salina, K	t address of well if	located within city?	
RR#, St. Address, Box #:	OShiple Dr. Ai	Application No	culture, Division of umber:	Water Resources
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL WELL'S STATIC WAT	59 ER LEVEL	ft.	
N W	WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Sup 6 Oil Field Water 9 7 Lawn and Garden 9 8 Air Conditioning	Supply 10 Monitorin	ng Well n Well
S W S E	If yes, mo/day/yr s	eriological sample so ample was submitted. ted: Yes No.\	•	it? YesNo
5 TYPE OF BLANK CASING USED:				
	rought 7 Fibers sbestos-Cement 8 Concr	glass (9)Other ete Tile	(specify below)	
Blank casing diameter Casing height above or belo	in. Was casing on land surface	pulled? Yes	No If yes, how	much
	rom. O.ft. to 4 Com	pocted [] ay Fromft. to	Dether COMPACTED.  O 22. W. H. Gent Jone 2	Clay / Sand Upl to 59 (Sour
What is the nearest source  1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool	6 Seepage pit 7 Pit privy	n: 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water gold by the storage of the s	age Well	Decify below)
Direction from well?		How many feet?		
FROM TO F	PLUGGING MATERIALS			
C 4 Compa	reted Clay			
4 226 18107	nute.	_		
24 DC 101 DC				
	200			
7 CONTRACTOR'S OR LANDOWNER'S ON (mo/day/year)	cense No	This Water Well ne of .Glb.Coll	Record was completed	d on (mo/day/year)
		. 6. 1 1	J. Division City and City	

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.