IDNO PZ-1

			WATER WELL FLOGGING R	ECOND POINT WWW-31	NON 024-1212 ID 1	VO	
1 LOCA	TION OF WATER	WELL:	Fraction	Section Number	Township Number	Range	Number
County:	Saline		SW 4 NW 4 NW 4	30	14	2	E W
Distance and	direction from nea		ity street address of well if loc	ated within city?			
2013	S. Ohi	6 5	Salina KS	67401			
2 WATE	ER WELL OWNER:	Southg	ate Coin Lau	ndry			
RR #,	St. Address, Box #: tate, ZIP Code :	2013 5			e, Division of Water Resour	rces	
	K WELL'S LOCATION		4 DEPTH OF WELL				
	(" IN SECTION BO			R LEVEL 18.15 ft.			
	N 1		WELL WAS USED AS:		•		
X,	wn	VE	1 Domestic		0 Doweto	ring	
	VV	1	2 Irrigation	5 Public Water Supply6 Oil Field Water Supply		•	
w		-	3 Feedlot	7 Domestic (Lawn & G	Sarden) 11 Injection	n Well	
VV		E	4 Industrial	8 Air Conditioning	12 Other		
s'	w s	SE -	Was a chemical / bacteriolo	ogical sample submitted to Do	epartment? Yes	NoX	
			Water Well Disinfected: Y	es · No X			
	S		Water Well Distributed.	10.,			
5 TYPE	OF BLANK CASIN	NG USED:					
1 Ste		•		, , ,	pelow)		
	casing diameter	l in.	pestos-Cement 8 Concre Was_casing pulled?	Yes No .		uch3.	
Casir	ng height above or	belowland su	face36				
١٥	JT PLUG MATERIA		eat cement 2 Cement gro	· · · · · · · · · · · · · · · · · · ·	Other		
	Plug Intervals: is the nearest sour		ts to5t. ft contamination:	., Fromft. t	to ft., From	to	o ft
1 Septic tank			6 Seepage pit	11)Fuel storage	16 Other (sp	ecify below)	
2 Sewer lines			7 Pit privy	12 Fértilizer storage			*******
3 Watertight sewer lines 4 Lateral lines			8 Sewage lagoon 9 Feedyard	13 Insecticide storage14 Abandoned water			
	Cess pool		10 Livestock pens	15 Oil well/Gas well			
Direc	tion from well?	N		y feet?150			
FROM	То	Di I	JGGING MATERIALS	· · ·			
	210						
48'			te chips				
3`_	0, N	ative	material				
							-
7 CONT	TRACTOR'S OF	LANDOWNE	R'S CERTIFICATION: Thi	s water well was plugge	d under my jurisdiction	and was cr	ompleted on
(mo/d	ay/year) .6.4.	-07	R'S CERTIFICATION: Thi	and this record is tri	ue to the best of my know	riedge and b	elief. Kansas
Vvater 6	5-67	under the	e business name of Sce	en Field Contra	ater well necord was col	inpleted on (
by (si	gnature)	- Tecks	an-				

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, Geology Section, 1000 SW Jackson St. Ste. 420. Topeka. Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.