					1		
1 LO	CATION OF WATE	R WELL:	Fraction	Section Number	Township Number	Range Number	
County: Ellsworth			NW 1/4 SE 1/4 SW 1/4	21	14	8 w	
Distance and direction from nearest town or city street address of well if located within city?  N/A							
	WATER WELLOWNER: John H. Tanton Jr.  RR #. St. Address. Box #: 1525 Avenue E Board of Agriculture, Division of Water Resources						
	St. Address, Box State, ZIP Code	Audiess, Dox #. 1020 //Veride L					
	RK WELL'S LOCA "X" IN SECTION		4 DEPTH OF WELL	46 ft			
AN	N N	BOX.	WELL'S STATIC WATER LEVEL				
			WELL WAS USED AS:				
	- N W	- N E	Domestic	5 Public Water Supp		•	
			2 Irrigation 3 Feedlot	6 Oil Field Water Su 7 Domestic (Lawn &		oring Well ion Well	
w		E	4 Industrial	8 Air Conditioning	12 Other		
<u> </u>	Was a chemical / bacteriological sample submitted to Department?Yes						
<u> </u>	S		water well Disinfected:	Yes 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 Sandstone Rock							
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile							
Casing height above or below land surface							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From5ft. to4.5ft., Fromft. toft., Fromft.							
What is the nearest source of possible contamination:							
1 Septic tank 2 Sewer lines			<ul><li>6 Seepage pit</li><li>7 Pit privy</li></ul>	<ul><li>11 Fuel storage</li><li>12 Fertilizer storag</li></ul>		pecify below) ilizers &	
3 Watertight sewer lines 4 Lateral lines		<ul><li>8 Sewage lagoon</li><li>9 Feedyard</li></ul>	<ul><li>13 Insecticide stora</li><li>14 Abandoned water</li></ul>	•	icides		
1	Cess Pool		10 Livestock pens	15 Oil well/Gas well			
Direction from well?Nor.th							
FROM TO PLU		GGING MATERIALS					
46	38	Chlorinat	ed Sand				
38	18	Subsoil C	lays				
18 5 Fill Sand							
5 4.5 Bentoni		Bentonite					
4.5	0	Topsoil					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
Water Well Contractor's License No.  10_17_01  This Water Well Record was completed on (mo/day/year)							
Water Well Contractor's License No.  10-17-01  by (signature)  This Water Well Record was completed on (mo/day/year)  Landowner  Landowner  Landowner							
INSTRI	JCTIONS: Use	e typewriter or b	all point pen. Please press t	firmly and print clearly. Ple	ase fill in blanks, under	ine 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.							