1 LOCATIO	ON OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County:	Saline	NE1/4NW1/4 SE/4	1	15	4	
Distance and direction from nearest town or city street address of well if located within city?						
Vances Land Dayslanars LLC 7 Cary Hocker						
2 WATER WELL OWNER: Kansas Land Developers LLC % Gary Hecker						
RR#, St. Address, Box #: 3331 S Lightville RD Board of Agriculture, Division of Water Resources City, State, ZIP Code : Salina, KS 67401 Application Number:						
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL28ft.						
WELL WAS USED AS:						
	N W N F 1 Domestic 5 Public Water Supply 9 Dewatering					
	"	2 Irrigation	6 Oil Field Water 9	Supply 10 Monitorin	g Well	
w		E 4 Industrial	8 Air Conditioning	12 Other. /2.	everuser.	
Was a chemical/bacteriological sample submitted to Department? YesNo.X If yes, mo/day/yr sample was submitted						
Water Well Disinfected: Yes. V No						
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)						
Z PVC) 4 ABS 6 Asbestos-Cement 8 Concrete Tile						
Blank casing diameter						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Gentonite 4 Other						
Grout Plug Intervals: From. 4.ft. to. 3ft., Fromft. toft., From toft.						
What is the nearest source of possible contamination:						
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage						
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well						
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well?						
FROM	то	PLUGGING MATERIALS				
28	14 ch 1	orinated sund				
14	a sus.	<u>spel</u>	_	RECEI ¹	VED	
4	3 ben	tonitz	_	•		
3	0 top	'Soil		AUG 2 4		
				BUREAU OF	WATER	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed						
on (mo/day/year)						
by (signature)						

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.