1 LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number
County:	SALINE		SW 1/4SW 1/4 SE1/4	26	16	2 (
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL OWNER: VERNON TINKLER						
RR#, St. Address, Box #:11997 S SIMPSON RD City, State, ZIP Code :ASSARIA, KS 67416  Board of Agriculture, Division of Water Resources Application Number:						
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL						
AN "X" IN SECTION BOX:    WELL'S STATIC WATER LEVEL						
	T I		WELL WAS USED AS:			
	.l	_		<b>.</b>		
	W	N E	1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well			
w			3 Feedlot 4 Industrial	7 Lawn and Garden ( 8 Air Conditioning		yell,
				5 5		
s	S W S E Was a chemical/bacteriological sample submitted to Department? Yes					
If yes, mo/day/yr sample was submitted						
Water Well Disinfected: Yes No.X						
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)						
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile						
Blank casing diameterin. Was casing pulled? Yes No If yes, how much						
Casing height above or below land surfacein.						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: Fromft. toft., 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						
4 Lateral lines 9 Feedyard 14 Abandoned water well						
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well? 1911. How many feet? 229						
FROM	FROM TO PLUGGING MATERIALS					
9	5 SUBSOIL					
5	4.5	BENTONITE				
4.5 0 TOP SOIL						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed						
on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No						
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.						