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			raction SE v. N	E 115	. ) 1	Section Numb		ip Number	Range Number	
		n from nearest town or	City street address		W 1/4	_24	<u> </u>	9 <u>5</u> s	P SW EW	
	and dispose	a west		s of Well II locati	ac within cit	y! al	11		Dillo	
1	eeus	a war	8 8 -	- rreig	02 0	e HW,	456		RW-10	
		WNER: Mapes	conu	ay Sta	econ	/				
f	. Address, B		Levson	'al-	/				Division of Water Resources	
-	te, ZIP Code	the state of the s	and the same of th	The second of the second	as_		Applic	ation Number:	attaa oo aan oo eelmoo <b>reaa aasaa saada</b> alaadaalaan ahalo oo qoo dhaadaalaadaa haadaadaa aan oo ahaan aa aa aa aa	
B LOCA	TE WELL'S (" IN SECTION	LOCATION WITH DE	EPTH OF COMP	LETED WELL	<i>3</i> :	nt. ELE	VATION:			
	graceon and a second	N Deptr							3	
Ī		! WELL								
	NW	NE	Pump test	data: Well wat	er was	ft	after	hours p	umping gpm	
	1	Est.	rield <i>J. D</i> .	gpm: Well wat	er was	ft	after	hours p	umping gpm	
e w	W Bore Hole Diameter Sin. to								n. to	
ž. W	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							Injection well		
ī	sw _&	1 - 5 - 1	Domestic			water supply		12 ص	Other (Specify below)	
		2	frrigation	4 Industrial	7 Lawn an	d garden only	(10) Monitoring	well . Sec.	onery	
Į.	1	I Was a	a chemical/bacter	iological sample	submitted to	Department?	YesNo.	; If yes	, mo/day/yr sample was sub	
*		\$ mitted	<u> </u>				Water Well Disinf	ected? Yes	No	
5 TYPE	OF BLANK	CASING USED:	5 W	rought iron	8 Con	crete tile	CASING	JOINTS: Glue	d Clamped	
-	Steel	3 RMP (SR)	6 A	sbestos-Cement	9 Oth	er (specify be	low)	Weld	fed	
(2)		4 ABS	7 FI	berglass	, ,			Thre	aded	
Blank casing diameter										
Casing height above land surface										
TYPE O	SCREEN C	OR PERFORATION MAT	ERIAL:		(D)	PVC		Asbestos-cem		
1 8	iteel	3 Stainless steel	5 FI	berglass	8 1	RMP (SR)	11	Other (specify	)	
2 E	Irass	4 Galvanized ste	el 6 Ce	oncrete tile		ABS	12	None used (or	pen hole)	
		RATION OPENINGS AF	RE:	5 Gauz	ed wrapped		8 Saw cut		11 None (open hole)	
00	Continuous sl	ot 3 Mill slot		6 Wire	wrapped		9 Drilled hol	es		
2 Louvered shutter 4 Key punched . 0 / 7 Torch cut 10 Other (specify)										
SCREEN-PERFORATED INTERVALS: From. 10.20 ft. to										
Sand 20/40 From ft. to ft., From ft. to ft.										
-GRAVEL-PACK INTERVALS: From. 8-25 ft. to										
		Fre	om	ft. to		ft., F		ft. 1		
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Sentonite										
Grout Inte		m	•	t., From		to &.	ft., From		ft. to	
What is t	he nearest s	ource of possible contan	nination:	:		10 Liv	10 Livestock pens		14 Abandoned water well	
1 Septic tank 4 Later			1	7 Pit privy		11 Fuel storage		15 Oil well/Gas well		
2 Sewer lines 5 Cess				8 Sewage lagoon		12 Fer	12 Fertilizer storage		16 Other (specify below)	
3 W	atertight sev	ver lines 6 Seepage pit		9 Feedyard		13 Ins	ecticide storage			
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FROM	<u> </u>	LIT	HOLOGIC FOR		FROM	TO		PLUGGING I	NTERVALS	
	6	Brawn (	lay			~				
	14	Jan Cla	ry,	To be a second s						
	125	Grey Red	Shale	and operated with a subsequence of the subsequence	aniai (				obspecies we are analysis and an are a second and a second a second and a second and a second and a second and a second an	
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		pulsas dans actividades simulaturas y compressiones conservados que que la compressión de la compressión de la	na del della di reconsidera di discolario di discolario di conditi indicato di discolario di deconsidera di con					The extraction		
nga di jalan di Laguarda - na tanggan garija.		National Set Advanture von senson Advantuite Material State (Set Angus Adjanus von para supra annu annu annu a	····							
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		- Annual Process (Control of Annual Annua								
CONT	RACTOR'S	OR LANDOWNED'S CEI	RTIFICATION T	rie water well	e Massa	rintend (A)	annets wand /	٠ لد مدمر را بور ١١	on mar inginalization	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)										
Nater Wa	Nater Well Contractor's License No. 4.0.7 This Water Well Record was completed on (mo/day/yr) 4.30-96									
	business na		nenitor				73.0	oct -		
	C-MARKET CONTROL CONTROL CONTROL CONTROL			/ ) /			CHARLES AND ASSESSMENT OF THE PARTY OF THE P	Many		
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.										