ID NO._

1 LOCA	ATION OF WATER WELL:	Fraction	Section Number	Township	Number	Range	Number
County: Pa	wnee	SW ¹ / ₄ SW ¹ / ₄ SE ¹ / ₄ SE	32	21	S	16	E/(V
		n or city street address of well if lo	cated within city?				
	& 2nd - Larned						
2 WATI	ER WELL OWNER: Cons						
	ot. Address, Dox 11.	Main Street ned, KS 67550	Board of Agricultur Application Numbe		Nater Resour	ces	
	K WELL'S LOCATION WITH	DEDTH OF WELL 2	273 ft.				-
l I	(" IN SECTION BOX:		WELL'S STATIC WATER LEVEL1.76.0 ft.				
	N	WELL WAS USED AS	:				
	 W	1 Domestic	5 Public Water Supply	,	9 Dewater	ng	
		2 Irrigation 3 Feedlot	6 Oil Field Water Sup 7 Domestic (Lawn & 0	ply	10 Monitorin		
w		E 4 Industrial	8 Air Conditioning	aarucii)			
		Was a chemical / bacteriol	ogical sample submitted to D	epartment? Ye	es	NoX	
5	sw — SE — SE —		as submitted				
	x x	Water Well Disinfected: \	esNoX				
TVDF							
3	OF BLANK CASING USED						
2 st		5 Wrought 7 Fiberg 6 Asbestos-Cement 8 Concr	` '	•			
Blan	k casing diameter2	in. Was casing pulled?		1	f yes, how mu	ch 10 F1	t .
Casi	ng height above or below lar	nd surface – 2	in.				
0		1 Neat cement 2 Cement gro		Other			
	t Plug Intervals: From	m2.0 ft. to0 f	, Fromft. 1	to ft	., From	to	f
	Septic tank	6 Seepage pit	11) Fuel storage		16 Other (specify below)		
2 Sewer lines3 Watertight sewer lines		7 Pit privy 8 Sewage lagoon	12 Fertilizer storage 13 Insecticide storage			•	
4 Lateral lines		9 Feedyard	14 Abandoned water				
	Cess pool	10 Livestock pens	15 Oil well/Gas well				
Dire	ction from well?Immedia	ate Domain How man	y feet?				
FROM	то	PLUGGING MATERIALS					
0	20 Bento	nito					
U	ZU Bence	DIII Ce					
7 CON	TRACTOR'S OF LANDO	WNER'S CERTIFICATION: Th	s water well was plugged	d under my j	urisdiction a	nd was com	pleted on
— (mo/d Wate	day/year)4J.2U.5 r Well Contractor's License No	o 665 er the business name of Pro	and this record is tru This W	ue to the best ater Well Rec	of my knowle ord was com	edge and beli pleted on (mo	et. Kansas o/day/year)
4 -	-13-5 unde	er the business name ofPro	att Well Enviro	onmenta]	<u> </u>		
	- Church	1 6/14					
		r ball point pen. <u>Please press fi</u> Kansas Department of Health a					

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