KSA 82a-1212

1 LOCA	TION OF WAT	ER WELL:	Fraction	Section Number	Township Number	Range Number
County: Jawnee			SW45W4 NW4	36	21	19 E/W
		nearest town or	city street address of well if loo	cated within city?		
RR #, S City, Sta	R WELL OWN St. Address, Bo ate, ZIP Code WELL'S LOC 'IN SECTION N	ox#: P.O. Buint : Quint ATION WITH	4 DEPTH OF WELL	Board of Agricultu Application Numb ft. ER LEVEL 37 ft.	re, Division of Water Resouer:	ırces
NV.	v — —	— NE ——	1 Domestic	5 Public Water Suppl6 Oil Field Water Sup		
w •		E	3 Feedlot	7 Domestic (Lawn &	Garden) 11 Injection	n Well
VV			4 Industrial	8 Air Conditioning	12 Other .	
sv	v	— SE ———	Was a chemical / bacteriold If yes, mo/day/yr sample w Water Well Disinfected: Y	ogical sample submitted to I	Department? Yes	No
	S		water well disinfected: Y	es No		
5 TYPE	OF BLANK CA	ASING USED:				
1 Ste			rought 7 Fibergsbestos-Cernent 8 Concre	7 147	below)	
Blank Casin	casing diamet g height above	er l 7 in. e or below land s	Was casing pulled?	Yes No in.	If yes, how m	nuch
0	T PLUG MATI		Neat cement 2 Cement gro		Other	
	Plug Intervals:		ft. to ft	., Fromft.	to ft., From	to f
	s tne nearest : Septic tank	source of possibl	e contamination: 6 Seepage pit	11 Fuel storage	16 Other (cr	pecify helow)
2 Sewer lines			7 Pit privy	12 Fertilizer storage	Irriga	pecify below) tion well le away
Watertight sewer lines Lateral lines			8 Sewage lagoon9 Feedyard	13 Insecticide storag14 Abandoned water	r well & Mi	Le away
	Cess pool		10 Livestock pens	15 Oil well/Gas well		,
Direct	tion from well?		How many	y feet?		
FROM TO F			LUGGING MATERIALS			
41	38	Dana	te			
	7	Ala	11			
38	,,	C144 30	oil te	· ·		
7	4	Betoni	te			
4	Surface	Virt				
7 CONT (mo/da Water \ Jun . by (sig	RACTOR'S (ay/year)	OF LANDOWN Ne. 23. 200 r's License No	ER'S CERTIFICATION: This OS. Owner he business name of Sau	s water well was plugge and this record is tr This W DMIII Creek Far	d under my jurisdiction ue to the best of my know later Well Record was con	and was completed on ledge and belief. Kansas npleted on (mo/day/year)
						
INSTRUCT	IONS: Use ty	pewriter or bal	ll point pen. <u>Please press fir</u>	mly and print clearly. Ple	ase fill in blanks, underli	ine or circle the correct

answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.