				·							
1	LOCAT	ION OF WATI	ER WELL:	Fraction	Section	n Number	Township	Number	Range	Number	
County: McPherson				SE 1/4 NE 1/4 SE 1/4	30		21		2	W	
Distance and direction from nearest town or city street address of well if located within city?											
3 miles West of Moundridge, Ks.											
2											
ľ	RR #, St. Address, Box #: City, State, ZIP Code : Moundri			th Ave. Board of Agriculture, Division of Water Resources idge, Ks. 67107 Application Number:							
3	MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 3 6) ft					
w		w	N E X	WELL'S STATIC WATER WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial Was a chemical / bacter If yes, mo/day/yr samp Water Well Disinfected:	5 P 6 C 7 D 8 A iological le was s	Public Water Supp Dil Field Water Sup Domestic (Lawn & Air Conditioning Sample submitted Ubmitted	oply Garden) d to Departr	11 Injectio	ring Well on Well Geothe	∍rma.1 X	
		S						1.0			
5	TYPE OF BLANK CASING USED:										
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 2 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Polyethylene Blank casing diameter 3/4 in. Was casing pulled? Yes											
Casing height above or below land surface in.											
6		GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout X Bentonite 4 Other									
	Grout Plug Intervals: From0 ft. to200 ft., From0 ft. to200 ft., From0									200 fi	
	What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit				11 Fuel storage 16 Other (specify below)						
	2 Se	wer lines		7 Pit privy		Fertilizer storage	е	٠.			
		atertight sew Iteral lines	ver lines	8 Sewage lagoon 9 Feedyard	13 14	Insecticide stora Abandoned water	•				
5 Cess F				10 Livestock pens		Oil well/Gas well					
Direction from well? How many feet?									C. 1		
FROM TO PLU		GGING MATERIALS		PluggED - Sft to 200ft Bentorite							
0		3	Topsoil			Plug	961		- (L	
	3	32	Clay, ta	n/brown		` '	1	6	700 t	7.10	
	32	63	Clay, sa	ndy/tan				•	Rento	NITE	
	63	108		ed. to fine w/cl	ay la	yers			De		
108		200	Shale, h	ard-gray/red/wh	ite	_					
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)										
IN			-	all point pen. Please press f							
answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.											