1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number		
County:	Pawnee		NC 1/4S1 1/4 NE 1/4	1	22	18	
Distance and direction from nearest town or city street address of well if located within city?							
1½ West, ½ North of Frizel 2 WATER WELL OWNER: Lee Fisher							
RR#, St. A	ddress, B	ox #: Rt.	3, Box 128	Board of Agric	culture, Division of	Water Resources	
City, State, ZIP Code: Larned, Ks. 67550-9351 Application Number: 31688							
	IL'S LOCA IN SECTION		WELL'S STATIC WATER LEVEL32ft.				
			WELL WAS USED AS:				
w	W	X	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Sup 6 Oil Field Water 5 7 Lawn and Garden 6 8 Air Conditioning		ig Well Well	
s	Was a chemical/bacteriological sample submitted to Department? YesNo. If yes, mo/day/yr sample was submitted						
	S Water Well Disinfected: YesA No						
5 TYPE OF BLANK CASING USED:							
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 diameter16in. Was casing pulled? Yes No X If yes, how much							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Plug Intervals: From 32 ft. to 9 ft., Fromft. toft., From toft.							
What is the nearest source of possible contamination:							
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess Pool			7 Pit privy 8 Sewage lagoon	11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water i 15 Oil well/Gas wel	Meff age 'TMOII合'' ae 'TMOII合''	ecify below)	
Direction from well? How many feet?							
FROM	то	PLU	JGGING MATERIALS				
143	32	Gravel	,				
32	0	Cement					
	·						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)10-20-03 and this record is true to the best of my knowledge and belief. Kansas							
Water W	0-23-03	actor's Lice	nse Noユンチ under the business nam	This Water Well e of Rosenci	Record was completed rantz- Bemls	l on (mo/day/year)	
by (signature)							

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: 785/296-3565. Send one to Water Well Owner and retain one for your records.