

1 LOCATION OF WATER WELL: County: <u>Pawnee</u>	Fraction <u>1/4 C 1/4 NW 1/4</u>	Section Number <u>9</u>	Township Number <u>23</u>	Range Number <u>15W</u>																												
Distance and direction from nearest town or city street address of well if located within city? <u>3/4 north, 5 3/4 east of Zook, Ks.</u>																																
2 WATER WELL OWNER: <u>George Morrill</u> <u>521 Morris Ave</u> RR#, St. Address, Box #: <u>Larned, Ks. 67550</u> City, State, ZIP Code: <u>Larned, Ks. 67550</u> Board of Agriculture, Division of Water Resources Application Number: _____																																
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; height:100px; text-align: center; border-collapse: collapse;"><tr><td colspan="2">N</td><td colspan="2">N E</td></tr><tr><td>W</td><td>X</td><td></td><td>E</td></tr><tr><td colspan="2">S W</td><td colspan="2">S E</td></tr><tr><td colspan="2">S</td><td colspan="2"></td></tr></table>		N		N E		W	X		E	S W		S E		S				4 DEPTH OF WELL..... <u>72</u> .....ft. WELL'S STATIC WATER LEVEL..... <u>36</u> .....ft. WELL WAS USED AS: <table style="width:100%;"><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden Only</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other.....</td></tr></table> Was a chemical/bacteriological sample submitted to Department? Yes....No.. <u>X</u> . If yes, mo/day/yr sample was submitted.....  Water Well Disinfected: Yes.. <u>hth</u> No.....			1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden Only	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other.....
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5 TYPE OF BLANK CASING USED: <table style="width:100%;"><tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (specify below)</td></tr><tr><td>2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td>.....</td></tr></table> Blank casing diameter..... <u>16</u> .....in. Was casing pulled? Yes..... No.. <u>X</u> . If yes, how much..... Casing height above or below land surface.....in.					1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	.....																		
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6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other..... Grout Plug Intervals: From.. <u>36</u> ..ft. to.. <u>0</u> ....ft., From.....ft. to .....ft., From..... to.....ft. What is the nearest source of possible contamination: <table style="width:100%;"><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage</td><td>16 Other (specify below)</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td>.....none.....</td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr></table> Direction from well? ..... How many feet? .....					1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage	.....none.....	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		4 Lateral lines	9 Feedyard	14 Abandoned water well		5 Cess Pool	10 Livestock pens	15 Oil well/Gas well									
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year).. <u>8-20-98</u> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... <u>134</u> ..... This Water Well Record was completed on (mo/day/year) .. <u>8-24-98</u> ..... under the business name of ... <u>Rosencrantz-Bemis</u> ... by (signature) ..... <u>Freddie Barkan</u> .....																																
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly and 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: 913/296-3565. Send one to Water Well Owner and retain one for your records.																																