CONTRACTOR'S OR LANGUAGES SCERTIFICATION: This water well-was plugged under my jurisdiction and use complexed on colony street address of well if located within city? NW CONTROL OF HWV 183 and 10th Street, Kinsley, Kansis Junter Well Danker Bills Mutfler Stop SRM, St. Address, Bon #: 234 E. 10th Street Board of Agriculture, Division of water Resource City, State, 219 Code: Kinsley And Kull's Location with An "X" IN SECTION Box: WELL WAS USED AS: JUNE OF BLANK CASING USED: John Street Brown and Cever Supply John Street	1 LOCA	TION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
Distance and direction from nearest town or city street address of well if located within city? NW CORNEY OF HWY 183 and 10th Street Kinsley, Karsis 2 ware well owners Bills Mutfler Stopp RRW, St. Address, Box #: 224 E. 10th Street Board of Agriculture, Division of Water Resource City, State, 210 Code: Kinsley, Karsis JARCH WELL'S LOCATION WITH AN "X" IN SECTION BOX: HELL'S STATIC WATER LEVEL. B.HBft. WELL WAS USED AS: 1 Domestic S Public Water Supply 2 Irrigation 6 Oil Frield Water Supply 2 Irrigation 6 Oil Frield Water Supply 2 Irrigation 6 Oil Frield Water Supply 3 Feedlot 7 Isoan and Garden Only 11 Injection well 1 Tyes, morday/ry sample was submitted to Department? Tes. No. M. Was a chemical/bacteriological sample submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample was submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample submitted to Department? Tes. No. M. Was a chemical/bacteriological sample submitted to Department? Tes. No. M. Was a chemical/bacteriological sample was submitted to Department? Tes. No. M. Was a chemical/bacteriological sample was submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample was submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample was submitted to Department? Tes. No. M. Was a chemical/bacteriological sample was submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample was submitted to Department? Tes. No. M. S Was a chemical/bacteriological sample was submitted to Department? Tes. N	County:	EDWARDS	NE 1/4NW 1/4 SE 1/4	33	24	19 W
STATE MELL COMMER: Bills Mutfiler Stupp	Distance	and direction from nea	rest town or city street	t address of well if	located within city?	.,,,,
BBB, St. Address, Box #: 224 E. 10th Strift Board of Agriculture, Division of Water Resource City, State, 21P Code : KUNSICY, KONGAS, 67547 Application Number: MARK MELL'S LOCATION WITH AN "W" IN SECTION 80X: DEFIN OF WELL	2 WATER	DITIET OF HWY 183	and 10th Street,	KINSLEY, KA	25-25	
Sample of the second of the se	1	THE OWNER DITTS MY	Uttler Onop E 1091 Street			
WELL'S STATIC WATER LEVEL	City, St	ate, ZIP Code : Kin.	sley, Kansas 678	Application Nu	culture, Division of W nmber:	Water Resources
N WELL'S STATIC WATER LEVEL		WELL'S LOCATION WITH " IN SECTION BOX:			.ft.	
1 Domestic 5 Public Water Supply 2 Dewatering 2 Irrigation 6 Oil field Water Supply 3 Memoritoring uelt 3 Feedot 7 Lawn and Garden Only 1 Injection Welt 1 Injection Well 1 Inje			WELL'S STATIC WATE	r level8.46	.ft.	
Development of the property of			WELL WAS USED AS:			
Type of Blank Casing UseD: S S S S S S S S S S S S S			2 Irrigation 3 Feedlot	6 Oil Field Water So 7 Lawn and Garden O	upply Monitoring	Well Well
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 8 Blank casing diameter 2		S WS E	Was a chemical/bacter If yes, mo/day/yr san	riological sample sub mple was submitted	omitted to Department	? YesNo. ./ .
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) Open 4 ABS 6 Asbestos-Cement 8 Concrete Tile	L	S	Water Well Disinfecte	ed: Yes No. 🟏		
Blank casing diameter. 2	S TYPE O	F BLANK CASING USED:				
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout		(0,1,7 5 111 00)	ght 7 Fibergl stos-Cement 8 Concret	ass 9 Other (s e Tile	pecify below)	
Grout Plug Intervals: From. O. ft. to. 15. ft., From. ft. to ft., From. to ft. What is the nearest source of possible contamination: 1 Septic tank	Blank Casing	casing diameter2 height above or below (in. Was casing pu and surfaceO	lled? Yes No	If yes, how mu	ch 15'
Grout Plug Intervals: From. Oft. to	GROUT	PLUG MATERIAL: 1 Neat o	ement 2 Cement grout	3 Bentonite 4	Other	
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 1 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage 3 Water light 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 Direction from well? **E** How many feet? **H5** FROM TO PLUGGING MATERIALS O' 15' BENTOWITE 8" CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year). **Alabova and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \$27	Grout F	olug Intervals: From.	Oft. to 15ft.,	Fromft. to	ft From	to 1-
1 Septic tank 6 Seepage pit 7 Pit privy 12 Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 14 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well 16 Other (specify below) 15 Oil well/Gas well 15 Oil well/Gas well 15 Oil well/Gas well 15 Oil well/Gas well 16 Other (specify below) 15 Oil well/Gas well 15 Oil well/Gas well 15 Oil well/Gas well 16 Other (specify below) 15 Oil well/Gas well 16 Other (specify below)					Tronici,	
FROM TO PLUGGING MATERIALS O' 15' BENTONITE 8" CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)	1 Sep 2 Sew 3 Wat 4 Lat	otic tank wer lines ertight sewer lines eral lines	6 Seepage pit 7 Pit privy 12 8 Sewage lagoon 13 9 Feedyard 14	! Fertilizer storage Insecticide storage Abandoned water wel	••••••	
FROM TO PLUGGING MATERIALS O' 15' BENTONITE 8" BMW-8 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)	Directi	on from well? .SE				
O' 15' BENTONITE 8" BMW-8 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)	T]	• • • • • • • • • • • • • • • • • • • •	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)	0	15' BENTOW	TE 8"			
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)				BMW)-8		
Water Well Contractor's License No. 537						
by (signature)	Water We	ll Contractor's License	No527	s true to the best o This Water Well Reco	f my knowledge and be	lief. Kansas
PU - IS	by (sign	ature) folk folk		************	• • • • • • • • • • • • • • • • • • • •	

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print clearly</u>. 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.