KSA 82a-1212 ID NO.

				- 1					
1 LOCATION OF WATER WELL:				Fraction	Section Number	Township Number	Range Number		
Cour	·.y.	ney			W 14 NE 14 NW 14	18	24	32 100	
Distance and direction from nearest town or city street address of well if located within city?									
310 West Kansas, Garden City									
2	William Walland								
RR #, St. Address, Box #: 1000 SW Jackson Board of Agriculture, Division of Water Resources City, State, ZIP Code : Topeka, KS 66612 Application Number:								es	
3	MARK WELL'S LOCATION WITH				4 DEPTH OF WELL	33 _{ft.}			
 	AN "X" IN SECTION BOX:			f	WELL'S STATIC WATE	R LEVEL 42.8 ft.	•		
		TX T		1	WELL WAS USED AS:				
	1) AIF		1 Domestic	5 Public Water Supply	9 Dewater	ing	
Γ	NW		— NE ——— 		2 Irrigation	6 Oil Field Water Suppl	y (10) Monitori	ng Well	
w				E	3 Feedlot 4 Industrial	7 Domestic (Lawn & Ga8 Air Conditioning		Well	
						•			
-	sw	-sw			Was a chemical / bacteriological sample submitted to Department? Yes				
_		S		'	water well disinfected: Ye	S NO			
5	5 TYPE OF BLANK CASING USED:								
	(2)PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile								
Blank casing diameter in. Was casing pulled? Yes No If yes, how much 3 feet Casing height above or below land surface in.								chet	
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
	Grout Plug Intervals: From								
What is the nearest source of possible contamination:									
	1 Septic tank 2 Sewer lines				6 Seepage pit 7 Pit privy	(11) Fuel storage 12 Fertilizer storage	16 Other (spe	ecify below)	
	3 Watertight sewer lines				8 Sewage lagoon	13 Insecticide storage			
	4 Lateral lines 5 Cess pool				9 Feedyard 10 Livestock pens	14 Abandoned water w15 Oil well/Gas well	veli		
Direction from well? How many feet?									
FROM TO PLUGGING MATERIALS									
0 3 Silty Clay									
			ie .						
	28	33	Sand						
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on									
(mo/day/year) 11/7/2008 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No									
by (signature)									
INS	TRUCTI	ONS: Use	typewriter or	ball p	oint pen. Please press firm	nly and print clearly. Pleas	se fill in blanks, underlir	ne 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.									