1 LOCATION OF WATER WELL:			ER WELL:	Fraction	Section Number	Township Number	Range Number
County: Ford				NE1/4 SE 1/4 SW 1/4	26	265	25 W
Distance and direction from nearest town or city street address of well if located within city?							
2 WATER WELLOWNER: Coastal Mart Inc.							
2			A 41. 14	Nevada Ave Board of Agriculture, Division of Water Resources Application Number:			
		Address, Box e, ZIP Code	π.				
3		WELL'S LOCA			15.55 n		
Γ	N N			WELL'S STATIC WATER LEVEL 44.16 ft.			
				WELL WAS USED AS:			
	n	w —	— N E ——	1 Domestic 5 Public Water Supply 9 Dewatering			
				2 Irrigation 3 Feedlot	6 Oil Field Water Su 7 Domestic (Lawn &		toring Well tion Well
w				4 Industrial	8 Air Conditioning		r
	s	w	S E	Was a chemical / bacter	riological sample submitte	d to Department?Yes	No
		X	1	If yes, mo/day/yr samp	le was submitted	•	
		 S		Water Well Disinfected: Yes No			
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 diameter							
							much Entire Casing
							,
							to ft.
What is the nearest source of possible contamination:							
	1 Septic tank			6 Seepage pit file I storage 16 Other (specify below) 7 Pit privy 12 Fertilizer storage			
	2 Sewer lines 3 Watertight sewer lines			7 Pit privy 12 Fertilizer storage			
	4 Lateral lines 5 Cess Pool			9 Feedyard 10 Livestock pens	14 Abandoned wate15 Oil well/Gas well		
Direction from well?							
			GGING MATERIALS				
45,55		3	Bentonite Concrete	tond.			
3		0	Concrete				
-							
\vdash	<u>-</u>						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was complete on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansa Water Well Contractor's License No. 719 This Water Well Record was completed on (mo/day/year) under the business name of Below Grand Surface, Toc.							
Water Well Contractor's License No							
	by (sign	ature)	under the	business name of	wan prante Incharg		
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct							

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.