1 LOCATION OF WATER WELL:	Fraction	Section Number	Township	Number	Range Number
County: KIEW9	NIL 14/VW145VV14	26	2	7	19W
Distance and direction from nearest town or city street address of well if located within city? Umiles Wast Usmiles North of Greenshaug					
2 WATER WELL OWNER: Line R					
RR#, St. Address, Box #: Route Board of Agriculture, Division of Water Resources City, State, ZIP Code: 61c-eustung Karus (705) Application Number:					
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
	WELL WAS USED AS:				
N W X	1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	· · · · · · · · · · · · · · · · · · ·	Supply 10 M	Dewatering Monitoring Injection Other	Well
S E Was a chemical/bacteriological sample submitted to Department? YesNo If yes, mo/day/yr sample was submitted					
S	☐ Water Well Disinfec	ted: Yes 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 diameterin. Was casing pulled? Yes. X No If yes, how much. 5.4					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Plug Intervals: Fromft. toft., Fromft. toft., From toft. What is the nearest source of possible contamination:					
1 Septic tank2 Sewer lines3 Watertight sewer lines4 Lateral lines5 Cess Pool	6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water w 15 Oil well/Gas well	ge . age well	Other (spe	ecify below)
Direction from well? Nouth east. How many feet? 1000					
	Howite				
4 J Den	10014				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)					
INICTEL ICTIONIC, Lies to provide	and hall maintenant Olars and	. Carolina da tarabana	I DI (:II :		1 1:

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.