Donnty: GRAMT Number Netton from nearest town or city street address of well if located within city? Number NetLL Owner: SCHREPEL Family TRUST RRB, St. Address, Box 8: IIIM. COALEGE Application Number: Board of Agriculture, Division of Water Resources Application Number: IIIM. COALEGE Application Number: S MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: WELL MAS USED AS: WELL MAS USE	A LOCATION OF MATER MELL	F===4:==	Ocation Number	Tarmahin Number	Danier Number	
Distance and direction from nearest town or city street address of well if located within city? 7 N ON HWY 25 — 5 W ON CO. Rd. — 5 N Qnd 200 y8565 f 2 WATER WELL (WATER) ELL (WATER) 3 MARK WELL'S LOCATION WITH AN "W" IN SECTION BOX: WELL'S STATIC MATER LEVEL				<u>`</u>	1 1	
RR#, St. Address, Box #: JIN.COLLEGE RR#, St. Address, Box #: JIN.COLLEGE Roard of Agriculture, Division of Water Resources Application Number: AN "X" IN SECTION BOX: NELL'S STATIC MATER LEVEL				' ()	30 W	
RR#, St. Address, Box #: JIN.COLLEGE RR#, St. Address, Box #: JIN.COLLEGE RAPPlication Number: AN "X" IN SECTION BOX: NELL MAS USED AS: Demestic 5 Public Water Supply 9 Dewatering 9 Dirrigation 6 Oil Field Water Supply 10 Monitoring Well 17 John 11 Injection Well 12 Other. Was a chemical/bacteriological sample submitted to Department? YesNo TYPE OF BLANK CASING USED: Steel 3 RMP (SR) 5 Vrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter. J.C. in. Was casing pulled? Yes No If yes, how much GROUT Plug Intervals: From ft. to ft., From ft. ft. ft., From ft. to ft., From ft. to ft., From ft. ft. ft., From ft. to ft., From ft. ft. ft., From ft., From ft., From ft.				located within city?	2 m de Fort	
Bayrd of Agriculture, Division of Water Resources Application, State, 2IP Code: 414555 & 6860 Bayrd of Agriculture, Division of Water Resources Application Number: MARK WELL'S LOCATION MITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL	2 WATER WELL OWNER: SCHRE	PEL FAMILY T	RUST	6 1 4/14	a do yes Las	
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WELL'S STATIC WATER LEVEL	City, State, ZIP Code : 4150	10 EO, 10 0 1000	Application No	umber:		
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Water Well Disinfected: Yes		3 Feedlot	7 Lawn and Garden	Only 11 Injection	n Well	
If yes, mo/day/yr sample was submitted		e 4 industifiat	8 ATT CONCILCTOTING	iz other		
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Blank casing diameter	5 TYPE OF BLANK CASING USED:					
Blank casing diameter				(specify below)		
Casing height above or below land surface						
GROUT PLUG MATERIAL: Deat cement 2 Cement grout Bentonite 4 Other	Blank casing diameter	←in. Was casing land surface	pulled? Yes	No If yes, how	much	
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		CEMENT	_			
8' 3' Net Coment		pact Clar	u		-	
The state of the s	8' 3' Neat	Cement		9 (4		
•		•		* 5,		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
Water Well Contractor's License No. 2.0.8 This Water Well Record was completed on (mg/day/year) In	Water Well Contractor's Lice	ense Ng	This Water Well	Record was complete	d∕on (moy/day/yeap)	
by (signature)					,	
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: 913/296-3565. Send one to Water Well Owner and retain						