1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: HASKELL	SE1/4SE1/4 NW/4	35	ಎ9	33
Pram Sublette go WATER WELL OWNER: 7 RR#, St. Address, Box #: 25 City, State, ZIP Code : U	oing North on Hu	1 of \$8 kn	mile north, t	hen Imile
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  N  N  S  S  S	WELL'S STATIC WATE WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial  Was a chemical/bact If yes, mo/day/yr si	5 Public Water Sup 6 Oil Field Water 1 Lawn and Garden 8 Air Conditioning	oly 9 Dewaterin Supply 10 Monitorin 11 Injection 12 Other	g g Well Well
2 PVC 4 ABS 6  Blank casing diameter Casing height above or be  6 GROUT PLUG MATERIAL: 1 N  Grout Plug Intervals: What is the nearest source 1 Septic tank 2 Sewer lines 3 Watertight sewer line 4 Lateral lines 5 Cess Pool	Wrought 7 Fibers Asbestos-Cement 8 Concre  Low land surface	pulled? Yes. X  ut 3 Bentonite  ., Fromft. to	16 Other (sp ge age well	
Direction from well?5		How many feet?	.·.1.O	
217' 7'6" clo	tonite	nated)		
$\neg$ on (mo/day/year).9/.26	fcense No(25.0 under the business nam	rd is true to the be This Water Well e of	st of my knowledge an Record was completed Well. plugging	d belief. Kansas on (mo/day/year)

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 one for your records.