one for your records.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
county: Mcade	SW1/45W1/4 = 1/4	3	30	26
Distance and direction from ne	arest town or city stree	t address of well if	clocated within city?	407 67
Distance and direction from ne	SNorth 2	Miles F	OF FOWL	Er, Kall
2 WATER WELL OWNER: ///2	Iden FRYMS	INC		
RR#, St. Address, Box #: 7/1 Gaf 4 New Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box #: 7/1 Gar de Resources City, State, ZIP Code: Dodge City, Kan 67 Application Number:				
3 MARK WELL'S LOCATION WITH	4 DEPTH OF WELL	ER LEVEL 55	ft.	
— I AN "X" IN SECTION BOX: N	WELL'S STATIC WAT	ER LEVEL 55	ft.	
	WELL WAS USED AS:			
N W	1 Domestic	5 Public Water Sup	ply 9 Dewaterin	na
	2 Irrigation	2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well		
u l	3 Feedlot E 4 Industrial	7 Lawn and Garden 9 8 Air Conditioning		
		• •		
	Was a chemical/bact	eriological sample s	ubmitted to Departmen	nt? YesNo. 💢.
If yes, mo/day/yr sample was submitted				
Water Well Disinfected: Yes. No				
S				
5 TYPE OF BLANK CASING USED:		*		. 1
1 Steel 3 RMP (SR) 5 Wr	ought 7 Fiber bestos-Cement 8 Concr	glass 9 Other	(specify below)	2AN SAND
2 PVC 4 ABS 6 As	bestos-cement o concr	ete 11te	. <b>.</b>	
Blank tasing diameter	Was casing	pulled? Yes	No. ∕ If yes, how	which
6 GROUT PLUG MATERIAL: 1 Nea Grout Plug Intervals: Fr	Cement Cement gro	but 3 Bentonite	4 Other	/
Grout Plug Intervals: - Fr	om/D. ft. to?	., Sfrom. ?.? oft. •t	oft., From	6 to. 3ft.
What is the nearest source	of possible contamination	n:		
1 Septic tank	6 Seepage pit	11 Fuel storage		pecify below)
<pre>2 Sewer lines 3 Watertight sewer lines</pre>		12 Fertilizer stora	ge	
Lateral lines	9 Feedyard	14 Abandoned water	well	
5 Cess Pool	,	15 Oil well/Gas wel	2001	
Direction from well?	• • • • • • • • • • • • • • • • • • • •	How many feet?		
FROM TO P	LUGGING MATERIALS			
180 55 CL	EAN SAND			
	vtoNite			
	MENT			
3 Q Fi	er Ditt			
	•			
	W.W.			_
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:This water well was plugged under my jurisdiction and was completed on (mo/day/year)/2-2499 and this record is true to the best of my knowledge and belief. Kansas				
Water Well Contractor's Lic	cense No	This Water Well	Record was completed	d on (mo/day/vear)
by (signature)	will Sulfate	a	• • • • • • • • • • • • • • • • • • • •	
INSTRUCTIONS: Use typewriter	or ball point pen. Plea	ase press firmly and	print clearly. Pleas	se fill in blanks,
underline or circle the correc	ct answers. Send top the	ree copies to Kansas	Department of Health	and Environment,
Bureau of Water, Topeka, Kansa	s occio-coot. recepnor	ic. 713/270-3303. 3	end one to water wet	cowner and recain