KSA 82a-1212

LOCATION	LOE WATER WELL	Franklan	O-eties Neuroben	Taurahia Numbar	Danga Number
	N OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Sur	nner	NW14 NW14 SW14	9	32	T EW
Distance and dire	ction from nearest town or o	city street address of well if loc	ated within city?		
	E Hrgonia Kd	and 12 mi N	HWY 160		· · ·
2 WATER W	YELLOWNER: DANVI	lle Cooperativ Box 67	e i		
RR #, St. Ac City, State,	ddress, Box #: Danvi	11e KS 67036	Board of Agriculture Application Number	e, Division of Water Resourd ::	ces
	ELL'S LOCATION WITH SECTION BOX:	4 DEPTH OF WELL	17 tt.		
	N	WELL WAS USED AS:			
NW	NE	1 Domestic	5 Public Water Supply	9_Dewateri	ng
		2 Irrigation 3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G		
WX	E	4 Industrial	8 Air Conditioning	12 Other	
sw-	SE		gical sample submitted to De		No
			as submitted		
	S	Water Well Disinfected: Ye	es No		
5 TYPE OF	BLANK CASING USED:				· · · · · · · · · · · · · · · · · · ·
1 Steel		ought 7 Fibergl	ass 9 Other (Specify be	olow)	
PVC		bestos-Cement 8 Concre	`	eiow)	
	ing diameterin. eight above or below land su	Was casing pulled?		If yes, how mu	ch
6 GROUT PI	LUG MATERIAL: 1 N	eat cement 2 Cement gro	ut 3 Bentonite 4 C	Other	
Grout Plug	Intervals: From	ft. to ft.	, Fromft. to	ft., From	to ft
	e nearest source of possible			O	
1 Septic tank 6 Seepage pit 2 Sewer lines 7 Pit privy			11 Fuel storage12 Fertilizer storage	UST ba	cify below)
3 Watertight sewer lines4 Lateral lines		8 Sewage lagoon	13 Insecticide storage		
5 Cess		9 Feedyard10 Livestock pens	14 Abandoned water v15 Oil well/Gas well	well	
Direction f	from well? NW	How many	feet? 60		
FROM TO PLUGGING MATERI		UGGING MATERIALS			
		ote*	MW 5		
			KDHE #	= UZ 096 10	101
			Geo Cor		
			Jev Wi	-	1
			- *Well u	vas destrog i excavati	120
			- during	i excavati	0
		1.00			
7 CONTRAC	CTOR'S OF LANDOWN	ER'S CERTIFICATION: This 000 527 e pusiness name of	water well was plugged	under my jurisdiction a	nd was completed on
Water Well	Contractor's License No	527	This Wa	ter Well Record was comp	pleted on (mo/day/year)
by (signat	4-2005 under th	e business name of	oeo Core Inc		
		point pen. <u>Please press fir</u> sas Department of Health a			

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.