	· · · · · · · · · · · · · · · · · · ·			ER WELL RECORD	Form WWC-5		2a-1212		
ALS AT HARD ASSING USED: Substance And develope how how the clay of the company							-		· · · · ·
WHEN PRILL PORT A PRILL STATE WATER TO BE USED AS: 5 Public water supply sub-asserting was a chemicalized endogrinal action and surface. 1 Sheel 3 RANG CASING USED: 5 Would from the case of the cas						_27_	I T S	S	R /4 E/W
WATER WELL OWNER AT MATERIAL SALV (### ATSTACLED) State, 2D Code 4, 1414-12 State, 2D Code 4, 14	<i>,,</i> , , , , , , , , , , , , , , , , , ,		•		7	or Here	h, /10 2	1. 47	HOT KRAKSE
Settled Process of Processing Control of Agriculture, Division of Water Resource Application Number - Number								P1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	000, 1-1,10013
State, ZIP Code ATHER L. EMSAS, CAP 32. Application Number CONTREMENTS LOCATION WITH DEPTH OF COMPLETED WELL, Y.S. In. SECTION BOX. DEPTH OF COMPLETED WELL, Y.S. In. SECTION BOX. DEPTH OF COMPLETED WELL, Y.S. In. SECTION BOX. WELLS STATIC WATER LEVEL, Y.S. In. below land surface measured on modayly. #\$7.9 g.pm. Ent. Visid gorn. Well water was in. to she was a conditioning of 11 injection well 12 chine (Specify below) 1 Domestic 3 Feedor 6 Oil field water supply 3 amyetining 12 chine (Specify below) 2 Imagelion 4 Industrial 7 Lewn and garden only Quintinoting well 11 injection well 12 chine (Specify below) 2 Imagelion 3 Feedor 6 Oil field water supply 3 amyetining 12 chine (Specify below) 2 Imagelion 4 Industrial 7 Lewn and garden only Quintinoting well 11 injection well 12 chine (Specify below) 2 Imagelion 4 Industrial 7 Lewn and garden only Quintinoting well 12 chine (Specify below) 2 Imagelion 4 Industrial 7 Lewn and garden only Quintinoting well 12 chine (Specify below) 2 Price OF BLANK CASING USED. 5 Wrought iron 8 Concrete tile CASING JOINTS Glaud. Clamped 15 love only a graph was surface with the control of the price of the control of the co	R# St Address Boy	# 100	2× 2/7	4 23 70. (P2		race		Agricultura F	Nivision of Water Because
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WELL STATIC WATER LEVEL 1/6, \$\frac{\text{SY}}{2}\$. It below and surface measured on morisary? \$\frac{\text{HS}}{\text{FS}}\$ Pump test data. Well water was \$\text{t. after}\$ hours pumping gon gon below the property of the	AN "X" IN SECTION	BOX:	DEPTH OF	COMPLETED WELL	7.5	ft. ELEV	ATION:/.DL	10.04	
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2 Irrigation 4 Industrial 7 Lawn and garden only 6 Montroing well 19 Assembly		′ ¦ '						-	•
Was a chemical/bacteriological sample submitted to Department? Yes. No. If yes, mordayly sample was sumitted intended. Water Well Disinfactor? Yes No. Water Well Disinfactor? Yes No. Water Well Disinfactor? Yes No. If yes, mordayly sample was sumitted in the property of the Committed of the Co	SW	SE							
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ik casing diameter 2 in. to ft. Dia in. Dia i			•						
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From ft. to ft., From ft., to ft.	GRAVEL PAG	CK INTERVALS:							
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er Well Contractor's License No	CONTRACTOR'S C	R LANDOWNER'S	S CERTIFICAT	TION: This water well wa	s (1) constru	cted, (2) red	constructed, of (3)	plugged und	er my jurisdiction and was
er the business name of MAXVM TECH. by (signature) ////////////////////////////////////	CONTRACTOR'S Completed on (mo/day/s	R LANDOWNER'S	3/00			and this red	ord is true to the		
	mpleted on (mo/day/	year) /	3/00			and this red	ord is true to the		
of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.	mpleted on (mo/day/s iter Well Contractor's	year) /	614			and this red s completed	cord is true to toe but on (mo/day/yr)		

LOCATION OF WATER WELL: Fraction Section Township Number Range Number Number NE1/4 NE1/4 NE1/4 Distance and direction from nearest town or city street address of well if located within city? Pine, WATER WELL OWNER: Board of Agriculture, Division of Water Resource RR #, St. Address, Box #: **Application Number:** City, State, ZIP Code MARK WELL'S LOCATION WITH DEPTH OF WELL 3 AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL ! (O.S. ... 1. WELL WAS USED AS: NF 5 Public Water Supply 9 Dewatering 1 Domestic 6 Oil Field Water Supply 10 Monitoring Well 2 Irrigation 3 Feedlot 7 Domestic (Lawn & Garden) Injection Well W Е 4 Industrial 8 Air Conditioning 12 Other Was a chemical / bacteriological sample submitted to Department? Yes SE If ves. mo/day/vr sample was submitted No. Water Well Disinfected: Yes s TYPE OF BLANK CASING USED: 5 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass Other (Specify below) 2 PVC 6 Asbestos-Cement 8 Concrete Tile Yes.... Blank casing diameter....in. Was casing pulled? If ves, how much Casing height above or below land surface in. 3 Bentonite 4 Other **GROUT PLUG MATERIAL:** 1 Neat cement 2 Cement grout Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft. What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit Fuel storage 16 Other (specify below) 2 Sewer lines Pit privy Fertilizer storage 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 9 Feedyard Abandoned water well 4 Lateral lines 14 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well Direction from well? How many feet? FROM PLUGGING MATERIALS TO enton, to CONTRACTOR'S OR LANDOWNER'S CEBTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of the No.

Water Well Contractor's License No.

This Water Well Record was completed on (mo/day/year) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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.