1 LOCATIO	N OF WATER	WELL:	Fraction	Section Number	Township Number	Range Number
			SE 1/4SE 1/4 SW1/4	32	6	7
Distance and direction from nearest town or city street address of well if located within city?						
1/2 mile west of Beloit , KS						
2 WATER WELL OWNER: Allan Gengler						
RR#, St. / City, Stat	ddress, Bo		oit, KS	Board of Agric Application No	culture, Division of umber: N/A	Water Resources
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL. 1.80180-180ft.						
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVELft.						
			WELL WAS USED AS:			
wN	W	N E	1 Domestic 2 Irrigation 3 Feedlot E 4 Industrial	6 Oil Field Water 5	Supply 10 Monitori Only 11 Injectio	ng Well
1 @ 180; 1 @ 180; 1 @ 180 Was a chemical/bacteriological sample submitted to Department? YesNoX If yes, mo/day/yr sample was submitted						
	S		Water Well Disinfect	ted: YesNo.⊋	X	
5 TYPE OI		THE HEED.				· · · · · · · · · · · · · · · · · · ·
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 29 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile						
Blank casing diameter $3/4$ in. Was casing pulled? Yes No. x If yes, how much						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout X Bentonite 4 Other						
Grout Plug Intervals: From. Ω ft. to. 180 .ft., From. Ω ft. to 180 ft., From. Ω to. 18Ω .ft. What is the nearest source of possible contamination:						
2 Sewer lines 7 Pit privy 12 3 Watertight sewer lines 8 Sewage lagoon 13 4X Lateral lines 9 Feedyard 14				11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water of 15 Oil well/Gas wel	Fertilizer storage Insecticide storage Abandoned water well	
Direction from well?West						
FROM	то	PLI	UGGING MATERIALS			
0	2	Topsoil		163 1	65 Limeston	e
2					80 Gray Sha	
	10	Tan Cla	_	105	oo Gray bila	10
10	61	Gray Cl	_			
61	74		ıle -			
74	104	-	ale			
104	122	Red Sh	nale			
122 7 CONTRAC	163	Gray S	hale CERTIFICATION:This water		nder my jurisdiction	and was completed
on (mo) Water W	day/year). Well Contra 7/30/97	7/9/91 actor's Lice	nnder the business name	rd is true to the bear This Water Well e ofPeterson	st of my knowledge a	nd belief. Kansas d on (mo/day/year) NG:
INSTRUCTIO	NS: Use เ	ypewriter o	r ball point pen. Pleas	se press firmly and	print clearly. Plea	se fill in blanks

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.