1 LOC	CATION OF WATER WELL:	Fraction	RECORD Form WW0		NORange Number
		_	- 1		
County:	nd direction from nearest toy	Value of the street address of well if low		75	⊥3a €
Distance a	nd direction from ricalest tov	wir of only street address of weir it to	oatod within ony:		
2 WA	TER WELL OWNER: Ed	Jordan			
		a Elm St.	Board of Agrice	ulture, Division of Water Resou	rces
	State, ZIP Code :	em, KS 47734	Application Nu	mber:	
	RK WELL'S LOCATION WIT	H 4 DEPTH OF WELL	156'	t.	
AN	"X" IN SECTION BOX: N	WELL'S STATIC WAT	ER LEVEL 141 fi	t.	
		WELL WAS USED AS	:		
	NW NE	Domestic	5 Public Water Su	upply 9 Dewate	ring
		2 Irrigation 3 Feedlot	6 Oil Field Water7 Domestic (Lawr		
w		E 4 Industrial	8 Air Conditioning		·······································
		Was a chemical / bacteriol	ogical sample submitted	to Department? Yes	1
	SW SE	If yes, mo/day/yr sample w			6
	 X	Water Well Disinfected:	es No		
5 TYP	PE OF BLANK CASING USE	D:			
1 S	steel 3 RMP (SR) PVC 4 ABS	5 Wrought 7 Fiberg 6 Asbestos-Cement 8 Concr		cify below)	
Bla	nk casing diameter			No If yes, how m	uch
Cas	sing height above or below la	and surface	in.		
6 GR	OUT PLUG MATERIAL:	1 Neat cement 2 Cement gr		4 Other	
Gro	ut Plug Intervals: Fro	om 140 ft to 4 f		to .O ft., From + Grout	to 1
		ossible contamination nite			asite balanch
1 Septic tank2 Sewer lines		6 Seepage pit 7 Pit privy	11 Fuel storage12 Fertilizer stora		ecily below)
3 Watertight sewer lines4 Lateral lines		8 Sewage lagoon 9 Feedyard	13 Insecticide sto14 Abandoned w	3	
5 Cess pool		10 Livestock pens	15 Oil well/Gas w		
Dire	ection from well? N.E	How man	y feet? / 0.0 '		
FROM	то	PLUGGING MATERIALS			
/	·				
156	, 140, Was				
140	4, Ben	tonile			
4	0 Cem	ent Grout Pluy.			
	0'13	stop of Cement Po	d		
	1 13 1 A	have Caround love).		
	10	1001 Q 1 V HI /V I V V			
7 601	NTRACTOR'S OF LANDO	OWNER'S CERTIFICATION: Th	is water well was pluc	aged under my jurisdiction	and was completed on
(mo	/day/year)52	DWNER'S CERTIFICATION: Th	and this record i	s true to the best of my knowl	ledge and belief. Kansas
Water 5	er Well Contractor's License N	der the business name of	reno Pumo	s Water Well Record was con よういのし	npleted on (mo/day/year)
	signature)	~ B		7 - 7	
INSTRUC	CTIONS: Use typewriter of	or ball point pen. Please press fi	rmly and print clearly.	Please fill in blanks, underli	ne or circle the correct
		Kansas Department of Health			
		Kansas Department of Health a 12-1367. Telephone: 785/296-5			