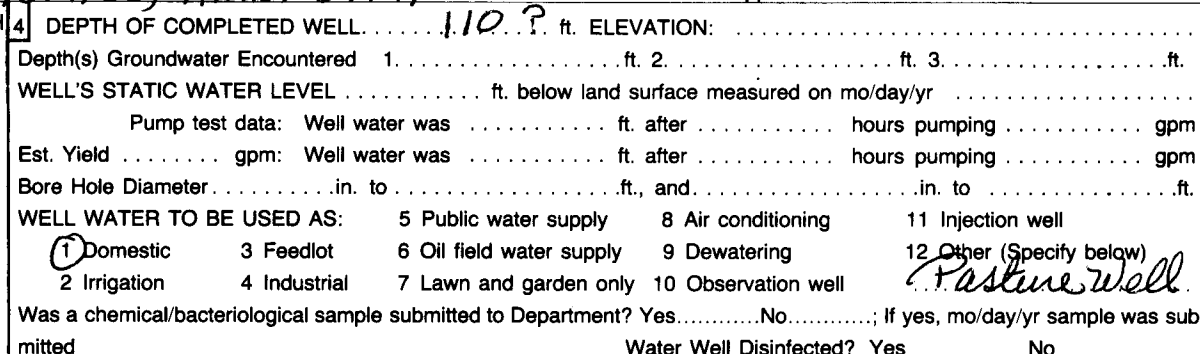


3	LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF COMPLETED WELL..... 110 ? ft. ELEVATION: .....
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6] GROUT MATERIAL: ① Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
Grout Intervals: From ..... ft. to ③ ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
What is the nearest source of possible contamination:  
1 Septic tank 4 Lateral lines 7 Pit privy ⑩ Livestock pens 14 Abandoned water well  
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) .....  
13 Insecticide storage .....  
Direction from well? 1 mile, north How many feet? .....

[illegible]

7 **CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3-18-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \_\_\_\_\_ This Water Well Record was completed on (mo/day/yr) \_\_\_\_\_ under the business name of \_\_\_\_\_ by (signature) Bill Daily

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send two three copies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.