1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: WYANDUTE	NW45W45t4	15		<u> </u>
Distance and direction from nearest town or city street address of well if located within city?				
2 WATER WELLOWNER: CINUX LEASING, INC.				
RR #, St. Address, Box #: City, State, ZIP Code: Application Number: Board of Agriculture, Division of Water Resources Application Number:				
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL	11.7 n		
WELL'S STATIC WATER LEVEL DEX ft.				
	WELL WAS USED AS:			
N W	1 Domestic 2 Irrigation	5 Public Water Supp 6 Oil Field Water Su		tering oring Well
W E	3 Feedlot 4 Industrial	7 Domestic (Lawn & Air Conditioning	Garden) 11 Injecti	on Well
Was a chemical / hacteriological sample submitted to Department? Ves No.				
S W S E S E If yes, mo/day/yr sample was submitted to Department? Tes				
Water Well Disinfected: Yes No				
5 TYPE OF BLANK CASING USED:				
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)				
PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile				
Blank casing diameter. School in. Casing height above or below land	Was casing pulled?	Yes No	.f If yes, how m	nuch
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3)Bentonite (4)Other				
Grout Plug Intervals: From	11.5 ft. to	, Fromft. to		to f
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 1 Fuel storage (FUCMEC) 16 Other (specify below)				
2 Sewer lines 3 Watertight sewer lines	7 Pit privy 8 Sewage lagoon	12 Fertilizer storag 13 Insecticide stora	е '	
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned wate 15 Oil well/Gas wel	er well	
Direction from well?				
FROM TO PLUGGING MATERIALS				
0 3 CUMPACIEN SOUG				
3 19.5 BENTU	NIL PHILA			
7 17.7 17.101.00	VIIC VIIIF Z			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)				
Water Well Centractor's License No				
by (signature)				
INSTRUCTIONS: Use typewriter of 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: 785/296-3565. Send one to Water Well Owner and retain one for your records.				