1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
			10Wilship Number		
County: Coffey NE1/4 NW/4NE1/4 9 19 14 E Distance and direction from nearest town or city street address of well if located within city?					
6th + Cedar Lebonks.					
2 WATER WELL OWNER: Rodney Criqui RR#, St. Address, Box #: 14 E. Sax Fox Board of Agriculture, Division of Water Resources					
City, State, ZIP Code: Lebo Ks 66836 Application Number:					
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL					
N WELL'S STATIC WATER LEVELft. 25					
X	WELL WAS USED AS:				
N W N E	N E Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well				
	3 Feedlot	7 Lawn and Garden (Well	
		5 Mil Soliditioning	.2 00.00		
Was a chemical/bacteriological sample submitted to Department? YesNo.X. If yes, mo/day/yr sample was submitted					
Water Well Disinfected: YesX No					
S					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
Blank casing diameterin. Was casing pulled? Yes No If yes, how muchin.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Plug Intervals: From. 4.ft. to. 3.5.ft., Fromft. toft., From toft.					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)					
2 Sewer Lines 3 Watertight sewer lines	8 Sewage lagoon		ge		
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned water w 15 Oil well/Gas well			
Direction from well? East					
FROM TO PLUGGING MATERIALS					
30 4 lines	creenings				
[bentonite				
	creenings				
3. 3 6 11116	CICETITAS				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and 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: 913/296-3565. Send one to Water Well Owner and retain one for your records.					