1	LOCATION OF WATER WELL:	Fraction	Section	Number	Tawnehip	Number	Range	Number	
Cou	INTY: SEGUICK	'NW BACK N N	3		210	S	IE	E/W	
Dietance and direction from nearest fown or city street address of well if located within city?									
WELLS ARE LOCATED APPR. I MILE LESS OF THREE CITY AT 500 W 101ST STN 2 WATER WELL DWINER EL PASO MERCHANT ENERGY-PETROLEUM COMPANY CEL PASO)									
2 WATER WELLOWNER: EL PASO MEDICHANT ENERGY-PETROLEUM COMPANY (EL PASO) ATTN: JEN ALLENDER									
PR #, St. Addressa, Box #: Z. V. LEVADA AVE. Board of Agriculture, Division of Water Resources City, State, ZIP Code: COURADO SPRINGS, CO BYTO S. Application Number:									
3	The state of the s								
	AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL								
WELL WAS USED AS:									
	NE	1 Domestic 2 Irrigation 3 Feedlot	5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden)			9 Dewatering 10 Monitoring Well (1) Injection Well			
W		4 Industrial		nditioning	A	Other	*****		
	Was a chemical / bacteriological sample submitted to Department? Yes								
	If yes, mo/day/yr sample was submitted								
L	Water Well Disinfected: Yes NaX								
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specily below) (2) PVC 4 AB9 6 Asbestos-Cement 8 Concrete Tile									
Blank casing diameter in. Was casing pulled? Yes No X If yes, how much in.									
6 GROUT PLUG MATERIAL: Nest cement 2 Cement grout 3 Bentonite 4 Other									
Grout Plug intervals: From 3 ft. to 15 ft., From ft. to 17 ft., From 10 ft., From 11 ft., From 1									
What is the nearest source of possible contamination:									
	1 Septic tank 8 Sepage pit 2 Sewer lines 7 Pit privy 3 Watertight sewer lines 8 Sewage legoon 4 Lateral lines 9 Feedyard			11 Fuel storage 12 Fartilizer storage 13 Insecticide storage 14 Abendoned water well					
	4 Lateral lines 5 Cess pool		all/Gas well all/Gas well	reli					
Direction from well?									
FROM TO PLUGGING MATERIALS									
-	2 - 1 - 1 - 1								
-	3 15 NOV	CEMENT							
-									
						RECE	IVED		
						· · · · · · · · · · · · · · · · · · ·	IVED		
					ĺ	OCT 2	9 2004		
L									
					HUG	KEAU O	F WATE	R	
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on									
(mo/day/year)									
(mo/day/year)									
INIC		,							
ans	STRUCTIONS: Use typewriter or ball swers. Send lop three copies to Kan	sas Department of Health an	d Environme	nt, Bureau of	Water, Geok	ogy Section	1, 1000 SW	Jackson	
St., Ste. 420, Topeka, Kansas 66812-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.									