

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<i>Crawford</i>	$\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$	<i>17</i>	<i>30S</i>	<i>25</i> <input checked="" type="checkbox"/> W

Distance and direction from nearest town or city street address of well if located within city?
710 Lisa Road, Pittsburg, KS 66762

2	WATER WELL OWNER: <i>Tina Lashley</i>	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #:	<i>710 Lisa Road</i>	Application Number:
City, State, ZIP Code :	<i>Pittsburg, KS 66762</i>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <i>39</i> ft.												
		WELL'S STATIC WATER LEVEL <i>23</i> ft.													
WELL WAS USED AS:															
<table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other <i>house disposal into coal mine</i></td> </tr> </table>				1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other <i>house disposal into coal mine</i>
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Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>															
If yes, mo/day/yr sample was submitted															
Water Well Disinfected: Yes No <input checked="" type="checkbox"/>															
<i>note: borehole was not a well, but house sewer disposal</i>															

5	TYPE OF BLANK CASING USED:	<i>into coal mine void</i>
<input checked="" type="checkbox"/> Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <input type="checkbox"/> PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile		
Blank casing diameter <i>6</i> in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much		
Casing height above or below land surface <i>36</i> in. <i>below</i>		

6	GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="checkbox"/> Bentonite	4 Other																				
Grout Plug Intervals: From <i>3</i> ft. to <i>20</i> ft., From ft. to ft., From to ft.																									
What is the nearest source of possible contamination:																									
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Direction from well? <i>N</i> How many feet? <i>10ft</i>																									

FROM	TO	PLUGGING MATERIALS
<i>3</i>	<i>20</i>	<i>bentonite</i>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <i>10/2/2009</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>794</i> This Water Well Record was completed on (mo/day/year) <i>10/5/2009</i> under the business name of <i>Agricultural Engineering Associates</i> by (signature) <i>Jeff Murphy</i> (<i>Jeff Murphy</i>)
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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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.