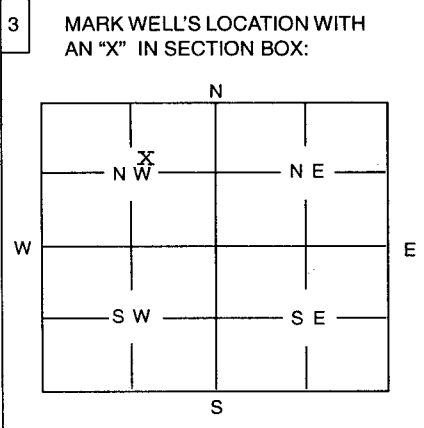


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Riley	SW 1/4 NE 1/4 NW 1/4	15	8	5E

Distance and direction from nearest town or city street address of well if located within city?
In town

2 WATER WELLOWNER: **Leonardville City**

RR #, St. Address, Box #: **P.O. Box 189** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Leonardville, Ks. 66449** Application Number:



4 DEPTH OF WELL**147**..... ft

WELL'S STATIC WATER LEVEL**94**..... ft.

WELL WAS USED AS:

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

Was a chemical / bacteriological sample submitted to Department? Yes No ...**X**.....
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes ...**X**... No

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 diameter.....**10**..... in. Was casing pulled? Yes No ...**X**..... If yes, how much

Casing height above or below land surface in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From**0**..... ft. to ...**88**..... ft., From ft. to ft., From to ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	
4 Lateral lines	9 Feedyard	14 Abandoned water well	
5 Cess Pool	10 Livestock pens	15 Oil well/Gas well	

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
0	88	cement grout
88	147	gravel

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)**11-8-2002**..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.**182**..... This Water Well Record was completed on (mo/day/year)**11-21-2002**..... under the business name of **Strader Drilling Co., Inc.**.....
 by (signature)*Dale Eskren*.....

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: 785/296-3565. Send one to Water Well Owner and retain one for your records.