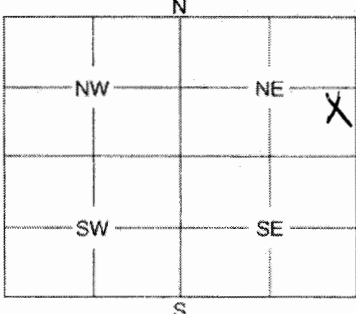


1 LOCATION OF WATER WELL: Leavenworth	Fraction NE $\frac{1}{4}$ SE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 2	Township Number 9	Range Number 22
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Distance and direction from nearest town or city street address of well if located within city?
10th Street and Pennsylvania, Leavenworth Kansas

2 WATER WELL OWNER: **Steve's Apco**

RR #, St. Address, Box #: **Manufactures State BAnk 1700 10th Street** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Leavenworth, Ks** Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL 16 ft. WELL'S STATIC WATER LEVEL 7.10 ft. WELL WAS USED AS: <table style="width:100%;"> <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><input checked="" type="radio"/> 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</td> </tr> </table> Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
1 Domestic	5 Public Water Supply	9 Dewatering											
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well											
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well											
4 Industrial	8 Air Conditioning	12 Other											

Water Well Disinfected: Yes No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
<input checked="" type="radio"/> 2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter in. Was casing pulled? Yes No If yes, how much
 Casing height above or below land surface in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite Other **surface silts/clays**

Grout Plug Intervals: From **3** **16** ft. to **5** ft. From **5** ft. to **0** ft. From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel storage
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

16 Other (specify below) **cont. site**

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
16	.5	Bentonite grout
.5	0	Surface silts/clays

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **11/22/06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/year) **12/22/06** under the business name of **Associated Environmental, Inc.**

by (signature) **B. Johnson**

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.