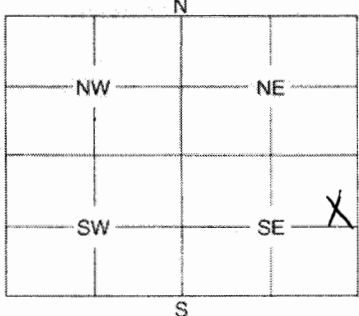


1 LOCATION OF WATER WELL: Leavenworth County:	Fraction NE $\frac{1}{4}$ SE $\frac{1}{4}$ NE $\frac{1}{4}$	Section 2	Number	Township 9	Number	Range 22	Number (EAW)
--	--	---------------------	--------	----------------------	--------	--------------------	------------------------

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 15 ft. WELL'S STATIC WATER LEVEL .. 7.8 ft. WELL WAS USED AS: <table style="width:100%; border: none;"> <tr> <td style="width:33%;">1 Domestic</td> <td style="width:33%;">5 Public Water Supply</td> <td style="width:33%;">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</td> </tr> </table> <p>Was a chemical / bacteriological sample submitted to Department? Yes No X..... If yes, mo/day/yr sample was submitted</p> <p>Water Well Disinfected: Yes No X.....</p>	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
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											

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

Casing height above or below land surface in.

6 GROUT PLUG MATERIAL: **3** Neat cement 2 Cement grout **3** Bentonite **4** Other **Surface silts/clays**

Grout Plug Intervals: From **15** ft. to **.5** ft., From **.5** ft. to **0** ft., From to ft.

What is the nearest source of possible contamination:
 1 Septic tank 6 Seepage pit 11 Fuel storage **6** Other (specify below) **cont site**
 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
15	.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.