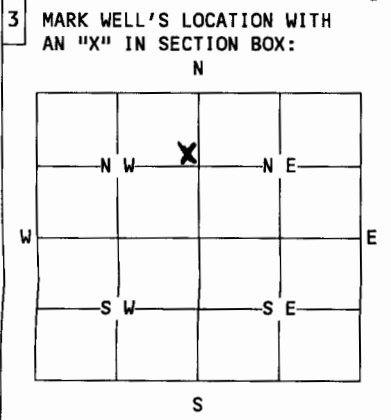


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Trego</b>		1/4 1/4 1/4	<b>NW 32</b>	<b>14</b>	<b>25</b>

Distance and direction from nearest town or city street address of well if located within city?  
**From I-76 Collyer Exit, 15 1/2 miles south and 1/2 mile west**

2 WATER WELL OWNER: **Leo Lashell**  
 RR#, St. Address, Box #: **308 Junction Ave**  
 City, State, ZIP Code: **WaKeeney, KS 67672**  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF WELL.....**30**.....ft.  
 WELL'S STATIC WATER LEVEL.....**1**.....ft.  
 WELL WAS USED AS:  
 Domestic      5 Public Water Supply      9 Dewatering  
 Irrigation      6 Oil Field Water Supply      10 Monitoring Well  
 Feedlot      7 Lawn and Garden Only      11 Injection Well  
 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:  
 Steel    3 RMP (SR)    5 Wrought    7 Fiberglass    9 Other (specify below)  
 PVC    4 ABS    6 Asbestos-Cement    8 Concrete Tile  
 Blank casing diameter...**5**.....in.    Was casing pulled? Yes..... No **X**.. If yes, how much.....  
 Casing height above or below land surface.....**6**.....in.

6 GROUT PLUG MATERIAL: 1 Neat cement     Cement grout    3 Bentonite    4 Other.....  
 Grout Plug Intervals: From.....ft. to.....ft., From **24**.....ft. to **27**.....ft., From..... to.....ft.  
 What is the nearest source of possible contamination:  
 Septic tank    6 Seepage pit    11 Fuel storage    16 Other (specify below)  
 Sewer lines    7 Pit privy    12 Fertilizer storage  
 Watertight sewer lines    8 Sewage lagoon    13 Insecticide storage  
 Lateral lines    9 Feedyard    14 Abandoned water well  
 Cess Pool    10 Livestock pens    15 Oil well/Gas well  
 Direction from well? **South**.....    How many feet? **100**.....

FROM	TO	PLUGGING MATERIALS
0	1	Sand
1	24	Subsoil
24	27	Cement grout
27	30	Subsoil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **2-3-05**..... This Water Well Record was completed on (mo/day/year)..... under the business name of **Evel Windmill Repair**..... by (signature) **David Sud**.....

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.