

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Rush	SE 1/4 SE 1/4 SE 1/4	12	17S	19W

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

3 West of Highway 4 & 183 3N

2	WATER WELL OWNER: Eugene Lattier	RR#, St. Address, Box #: PO. 357	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code: LACROSSE KS		Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:																				
	N																				
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4	DEPTH OF WELL: UNKNOWNft.
	WELL'S STATIC WATER LEVEL: UNKNOWNft.
	WELL WAS USED AS:
	<input checked="" type="radio"/> Domestic 5 Public Water Supply 9 Dewatering <input type="radio"/> Irrigation 6 Oil Field Water Supply 10 Monitoring Well <input type="radio"/> Feedlot 7 Lawn and Garden Only 11 Injection Well <input type="radio"/> 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..... No. X ...

5	TYPE OF BLANK CASING USED:
	<input checked="" type="radio"/> Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) <input type="radio"/> 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... 3'in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> Bentonite 4 Other.....
	Grout Plug Intervals: From... 1 ...ft. to... 3 ...ft., From.....ft. toft., From..... to.....ft.
	What is the nearest source of possible contamination:
	<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 16 Other (specify below) <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 13 Insecticide storage <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 5 Cess Pool <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 15 Oil well/Gas well
	Direction from well? How many feet?

Called Richard Harpe on 4-16-98 About plugging INS

FROM	TO	PLUGGING MATERIALS
		well collapsed
4	3	bentonite mound

Witnessed by
Chris Dunn
CKLEPG
1803 KANSAS AVE
GREAT BEND, KS 67530
(316) 793-6842

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7-15-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 424 This Water Well Record was completed on (mo/day/year) 4-14-98 under the business name of Town & Country Water Well by (signature) Albert Rex
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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, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain one for your records.