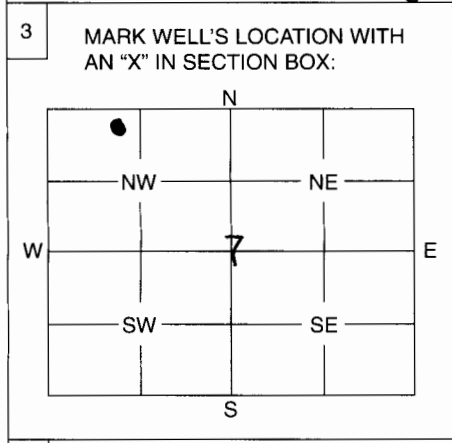


1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: <u>Rush</u>	<u>NW 1/4 NW 1/4</u> 1/4	<u>7</u>		<u>18</u>		<u>17</u>	E/W

Distance and direction from nearest town or city street address of well if located within city?  
1 mile South of LaCrosse and 3 miles + 1/4 mile East

2 WATER WELL OWNER: John Koriel  
 RR #, St. Address, Box #: Box 25  
 City, State, ZIP Code: Rush Center KS 67575  
 Board of Agriculture, Division of Water Resources  
 Application Number: \_\_\_\_\_



4 DEPTH OF WELL ..... 47 ft.  
 WELL'S STATIC WATER LEVEL ..... 244.5 ft.  
 WELL WAS USED AS:  
 1 Domestic  
 2 Irrigation  
 3 Feedlot  
 4 Industrial  
 5 Public Water Supply  
 6 Oil Field Water Supply  
 7 Domestic (Lawn & Garden)  
 8 Air Conditioning  
 9 Dewatering  
 10 Monitoring Well  
 11 Injection Well  
 12 Other .....  
 Was a chemical / bacteriological sample submitted to Department? Yes ..... No   
 If yes, mo/day/yr sample was submitted .....  
 Water Well Disinfected: Yes  No .....

5 TYPE OF BLANK CASING USED:  
 1 Steel  
 2 PVC  
 3 RMP (SR)  
 4 ABS  
 5 Wrought  
 6 Asbestos-Cement  
 7 Fiberglass  
 8 Concrete Tile  
 9 Other (Specify below) .....  
 Blank casing diameter ..... 4.5 in. Was casing pulled? Yes  No ..... If yes, how much .....  
 Casing height above or below land surface ..... 15 feet below in. 15 feet

6 GROUT PLUG MATERIAL:  1 Neat cement  2 Cement grout  3 Bentonite  4 Other .....  
 Grout Plug Intervals: From surface to 5 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 ..... none  
 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
<u>47</u>	<u>44</u>	<u>Sand</u>
<u>44</u>	<u>5</u>	<u>Dirt</u>
<u>5</u>	<u>surface</u>	<u>Quick Crete</u>

RECEIVED  
 SEP 27 2004  
 BUREAU OF WATER

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) ..... 9-17-04 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/year) .....  
 by (signature) John A Koriel under the business name of owner

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.