1	LOCATION OF WATER WELL:			<u> </u>	Fraction	Section Number		Township Number		Range	Number
County: Edwards					1/4 NC 1/4 NE 1/4		27	25		16	
Distance and direction from nearest town or city street address of well if located within city?											<u>J</u>
2½ North, 1½ East of Trousdale											
2	water wellowner: Rex Cudney										
	RR #, St. Address, Box #: 8865 E. Baseline Rd. #956 City, State, ZIP Code: Mesa, Az. XX 85208  Board of Agriculture, Division of Water Resources Application Number: 10,821										
3		WELL'S LOCA			4 DEPTH OF WELL82						
		N			WELL'S STATIC WATER LEVEL19 ft.						
					WELL WAS USED AS:						
	N	w —	— N ₽X——		1 Domestic		Public Water Supp	-	9 Dewat	•	
					2 <u>Irrigation</u> 3 Feedlot		Oil Field Water Su Domestic (Lawn &			ring Well on Well	
W				E	4 Industrial		Air Conditioning	• ,	-	•••••	••••••
5 F									No	<u>X</u>	
	If yes, mo/day/yr sample was submitted										
Water Well Disinfected: YesX No											
TYPE OF BLANK CASING USED:  1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)											
	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 diameter16 in. Was casing pulled? Yes NoX If yes, how much											
6	6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout Plug Intervals: From19ft. to										ft.	
What is the nearest source of possible contamination:											
	1 Septic tank 2 Sewer lines				6 Seepage pit		11 Fuel storage 16 Other (specify below) 12 Fertilizer storage				
	3 Watertight sewer lines				7 Pit privy 8 Sewage lagoon		Insecticide storage			ZIIC	
1	4 Lateral lines 5 Cess Pool				9 Feedyard		Abandoned wate				
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well  Direction from well?											
_			1			у төөт : ——————————————————————————————————	•••••	••••••			
F	ROM	то	F	LUG	GING MATERIALS						
	82	19	Gravel	pac	k						
	19	3	Cement								
					, to the same of t						
71	CONT	PACTOR'S	OR LANDON	MNIEI	D'S CEDTIFICATION: Th		well was stugge	d under my	iuriadiation	and was	nomalatad
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. Kar Water Well Contractor's License No. 134  Water Well Contractor's License No. 134  Water Well Contractor's License No. 134  Water Well Record was completed on (mo/day/year) under the business name of ROSENCTANTZ-BENIS											
	Water W	Vell Contracto	or's License No under	o the	business name of ROSC	encran	itz-Bemis <sup>This</sup>	Water Well Re	cord was com	pleted on (m	o/day/year)
by (signature)											
IN	STRUC	TIONS: Use	e typewriter o	r bal	point pen. Please press f	irmly and	d print clearly. Plea	ase fill in blar	ıks, underlir	ne or circle t	he correct
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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: 785/296-3565. Send one to Water Well Owner and retain one for your records.											