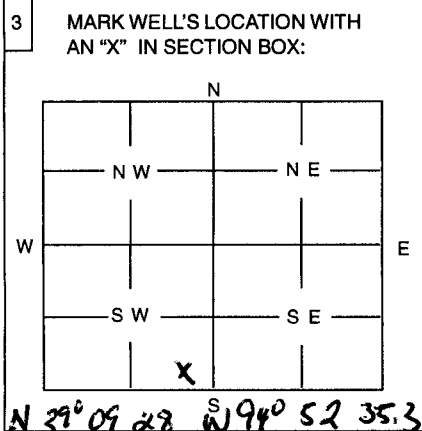


1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<u>Wyandotte</u>	<u>SW 1/4 SE 1/4</u> 1/4	<u>20</u>	<u>10 S</u>	<u>23 E</u>

Distance and direction from nearest town or city street address of well if located within city?
Danahoe Rd x 129th St East 680ft north side of Danahoe 25'

2 WATER WELL OWNER: Robert Gebhart
 RR #, St. Address, Box #: 12810 Danahoe Rd
 City, State, ZIP Code : Kansas City KS 66109
 Board of Agriculture, Division of Water Resources
 Application Number: UNK



4 DEPTH OF WELL 14 ft
 WELL'S STATIC WATER LEVEL 1.2 ft.
 WELL WAS USED AS:
 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

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 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile

Blank casing diameter 6 in. Was casing pulled? Yes No If yes, how much 17'
 Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other 2.5 CLP Bentonite + 98 Pounds Portland

Grout Plug Intervals: From 14 ft. to 0 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

Direction from well? North How many feet? Appx 500'

FROM	TO	PLUGGING MATERIALS
<u>14'</u>	<u>0'</u>	<u>Neat Cement</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9/30/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 415 This Water Well Record was completed on (mo/day/year) 08/30/10 under the business name of Terrucon Consultants, P.C.
 by (signature) [Signature]

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: 785/296-3565. Send one to Water Well Owner and retain one for your records.