KSA 82a-1212

1	LOCAT	TION OF WATI	ER WELL:	Fraction	Section Number	Township Number	Range Number
딚	unty:	Wyano	lotte	SW4 SE4 NW4	30	10	24E
Distance and direction from nearest town or city street address of well if located within city?							
3488 W. Drive, KC, KS							
2	water wellowner: Wyandotte County						
	RR #, St. Address, Box #: 34 88 W Drive Board of Agriculture, Division of Water Resources City, State, ZIP Code : Fansas City KS (66109 Application Number:						
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL							
WELL'S STATIC WATER LEVEL ft.							
		N W		WELL WAS USED AS:  1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply Monitoring Well			
	N						
w	X			3 Feedlot	7 Domestic (Lawn &	Garden) 11 Injection	on Well
**			E	4 Industrial	8 Air Conditioning	12 Other	
							No
	If yes, mo/day/yr sample was submitted						
	L	S		Water Well Disinfected:	Yes No		
5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)							
PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile							
Blank casing diameter							
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout  Bentonite 4 Other							
Grout Plug Intervals: From							
What is the nearest source of possible contamination:							
	1 Septic tank 6 Seepage pit				11 Fuel storage	16 Other (sp	ecify below)
		ewer lines /atertight sew	ver lines	7 Pit privy 8 Sewage lagoon	<ul><li>12 Fertilizer storage</li><li>13 Insecticide storage</li></ul>		
4 Lateral lines			101 111103	9 Feedyard	14 Abandoned wate		
5 Cess Pool 10 Livestock pens 15 Oil well/Gas well							
Direction from well?							
FROM TO PLUGGING MATERIALS							
_	25' ( Benton			ite			
L	1' D' Grave		<u> </u>				
		]	•				
					-		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was complete							
on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.  Under the business name of the initial was plugged under the best of my knowledge and belief. Kansas Water Well Contractor's License No.  This Water Well Record was completed on (mo/day/year) under the business name of the initial was completed.  This Water Well Record was completed on (mo/day/year) by (signature)							
under the business name of Kin ight ty En vinexymenta L. Jin C.							pieted on (mo/day/year)
	by (sigr	nature)	Ilie _	In this	<u> </u>		
IN	ISTRUC	TIONS: Use	typewriter or ba	all point pen. <u>Please press f</u>	irmly and print clearly. Plea	ase fill in blanks, underlin	e 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.							

