

1 LOCATION OF WATER WELL: Fraction 1/4 NW 1/4 SW 1/4 SW 1/4 Section Number 27 Township Number T 10 S Range Number 25 E W
 County: Wyandotte

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 3126 Brinkerhoff Road
Kansas City, KS. 66115

Global Positioning Systems (GPS) information:
 Latitude: 39.145308 (in decimal degrees)
 Longitude: -94.621123 (in decimal degrees)
 Elevation: 748
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: Union Carbide Corporation
 RR#, St. Address, Box #: PO Box 8361
2001 Union Carbide Drive
 City, State ZIP Code: South Charleston, WV, 25303

GPS unit (Make/Model: _____)
 Digital Map/Photo. Topographic Map. Land Survey
 Est. Accuracy: < 3 m. 3-5 m. 5-15 m. > 15 m

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
W	NW	NE	E
	SW	SE	
S			

X is located in the SW section.

4 DEPTH OF WELL 7 ft.
 WELL'S STATIC WATER LEVEL unknown ft
 WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input checked="" type="checkbox"/> Injection Well
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input checked="" type="checkbox"/> Other <u>Air sparge</u>

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below) _____
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter 1 in. Was casing pulled? Yes No If yes, how much 7
 Casing height above or below land surface _____ in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 0 ft. to 7 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input type="checkbox"/> Other (specify below) _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	7	<u>Bentonite chips Hydrotel</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo day year) 8-24-2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 597. This Water Well Record was completed on (mo day/year) 8-24-2016 under the business name of Cascade Drilling by (signature) [Signature]

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.

