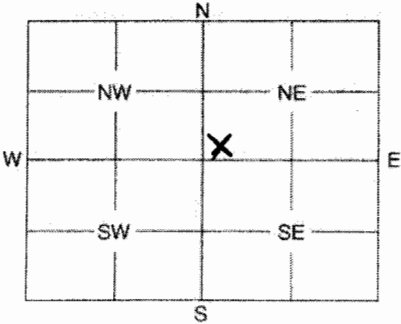


1	LOCATION OF WATER WELL: <b>Riley</b>	Fraction <b>SW <math>\frac{1}{4}</math> SW <math>\frac{1}{4}</math> NE <math>\frac{1}{4}</math></b>	Section Number <b>24</b>	Township Number <b>10S</b>	Range Number <b>7E</b>
County: <b>E/W</b>					

Distance and direction from nearest town or city street address of well if located within city?

**2305 Stagg Hill Road, Manhattan, KS**

2	WATER WELL OWNER: <b>Continental Baking Co. c/o Travis Bryant</b>	
RR #, St. Address, Box #: <b>P.O. Box 419627</b>		Board of Agriculture, Division of Water Resources
City, State, ZIP Code: <b>Kansas City, Ks 64141-6627</b>		Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL ..... <b>31.73</b> ..... ft. WELL'S STATIC WATER LEVEL <b>20.80</b> ... ft. WELL WAS USED AS: <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><input checked="" type="radio"/> 10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other .....</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other .....
1 Domestic	5 Public Water Supply	9 Dewatering													
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 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 <b>X</b> ..... If yes, mo/day/yr sample was submitted ..... Water Well Disinfected: Yes ..... No <b>X</b> .....													

5	TYPE OF BLANK CASING USED:	
1 Steel    3 RMP (SR)    5 Wrought    7 Fiberglass    9 Other (Specify below) <input checked="" type="radio"/> 2 PVC    4 ABS    6 Asbestos-Cement    8 Concrete Tile		
Blank casing diameter <b>2</b> ..... in.		Was casing pulled? Yes <b>X</b> ..... No ..... If yes, how much <b>20</b> .....
Casing height above or below land surface ..... in.		

6	GROUT PLUG MATERIAL: <b>3</b> 1 Neat cement    2 Cement grout <input checked="" type="radio"/> 3 Bentonite <input checked="" type="radio"/> 4 Other <b>surface silts/clays</b>	
Grout Plug Intervals: From <b>20</b> ..... ft. to <b>.5</b> ..... ft., <b>4</b> From <b>.5</b> ..... ft. to <b>0</b> ..... ft. From ..... to ..... ft.		
What is the nearest source of possible contamination:		
1 Septic tank    6 Seepage pit    11 Fuel storage 2 Sewer lines    7 Pit privy    12 Fertilizer storage 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		<input checked="" type="radio"/> 16 Other (specify below) <b>cont. site</b>
Direction from well? .....		How many feet? .....

FROM	TO	PLUGGING MATERIALS
<b>20</b>	<b>.5</b>	<b>Bentonite grout</b>
<b>.5</b>	<b>0</b>	<b>surface silts/clays</b>

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>11/9/06</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>585</b> This Water Well Record was completed on (mo/day/year) <b>12/07/06</b> under the business name of <b>Associated Environmental, Inc.</b> by (signature) <b>B. Johnson</b>	
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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.