

1	LOCATION OF WATER WELL: Riley	Fraction SW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 24	Township Number 10S	Range Number 7E	E/W
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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: Continental Baking Co. c/o Travis Bryant	
	RR #, St. Address, Box #: P.O. Box 419627	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code: Kansas City, Ks 64141-6627	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 30.20 ft. WELL'S STATIC WATER LEVEL 20.80 ... 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 & 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
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Was a chemical / bacteriological sample submitted to Department? Yes No ☒ X

If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No ☒ X

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 2 in.	Was casing pulled? Yes <input checked="" type="checkbox"/> X No If yes, how much 20
	Casing height above or below land surface in.	

6	GROUT PLUG MATERIAL: 3 Neat cement 2 Cement grout <input checked="" type="radio"/> Bentonite <input checked="" type="radio"/> Other Surface silts/clays																
	Grout Plug Intervals: From 20 ft. to 5 ft., From 5 ft. to 0 ft., From to ft.																
	What is the nearest source of possible contamination: <table border="0"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> </tr> </table>		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
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	Direction from well? How many feet?																

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

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