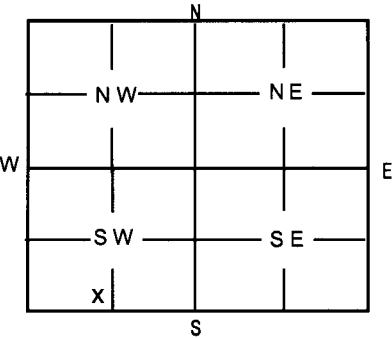


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range	Number
County: <u>Shawnee</u>	<u>SE 1/4 SW 1/4 SW 1/4</u>	<u>9</u>	<u>T 11 S</u>	<u>R 15</u>	<u>(E) W</u>

Distance and direction from nearest town or city street address of well if located within city?  
Approximately 3 miles north of Topeka

2 WATER WELL OWNER: Consolidated RWD #4 of Shawnee Co.  
3333 NW Button Rd.  
 RR#, St. Address, Box # P.O. Box 750777 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code Topeka, KS 66675 Application Number:

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  	4 DEPTH OF WELL <u>58</u> ft  WELL'S STATIC WATER LEVEL <u>29</u> 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 <u>12 Other</u> Supply Well  Was a chemical / bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____  Water Well Disinfected: Yes <input checked="" type="checkbox"/> No _____
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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 5 in. Was casing pulled? Yes \_\_\_\_\_ No   
 Casing height above or below land surface 48 in. If yes, how much \_\_\_\_\_

6 GROUT PLUG MATERIAL: 1 Neat Cement                      2 Cement grout                      3 Bentonite                      4 Other  
 Grout Plug Intervals: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From 30 ft. to 4 ft. From \_\_\_\_\_ ft. 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  
 3 Watertight sewer lines                      8 Sewage lagoon                      13 Insecticide storage                      None known  
 4 Lateral lines                      9 Feedyard                      14 Abandoned water well  
 5 Cess Pool                      10 Livestock pens                      15 Oil well/Gas well  
 Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	PLUGGING MATERIALS
58	30	Chlorinated Sand
30	4	Bentonite Holeplug
4	0	Compacted Soil

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 02-24-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 03-03-09 under the business name of Clarke Well & Equipment, Inc.  
 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 & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.