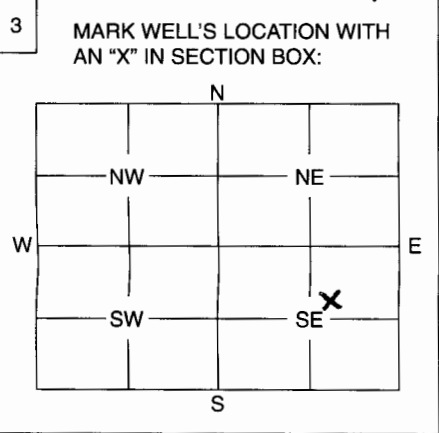


1 LOCATION OF WATER WELL: Fraction SW 1/4 NE 1/4 SE 1/4 Section Number 18 Township Number 11 Range Number 16 EW
 County: Shawnee

Distance and direction from nearest town or city street address of well if located within city?
635 NW Highway 24, Topeka

2 WATER WELL OWNER: City of Topeka
 RR #, St. Address, Box #: 215 SE 7th Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Topeka, KS Application Number:



4 DEPTH OF WELL 29.4 ft.
 WELL'S STATIC WATER LEVEL 16.3 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 12 Other

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)
 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile

Blank casing diameter in. Was casing pulled? Yes X..... No If yes, how much All.....
 Casing height above or below land surface 6 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 1 ft. to 20 ft., From ft. to ft., From to ft.

What is the nearest source of possible contamination:
 1 Septic tank 6 Seepage pit 10 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

4 Lateral lines 9 Feedyard 14 Abandoned water well

5 Cess pool 10 Livestock pens 15 Oil well/Gas well

Direction from well? East How many feet? 125

FROM	TO	PLUGGING MATERIALS
0	1	Native Soil
1	20	Grout

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11/3/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 704 This Water Well Record was completed on (mo/day/year) under the business name of maxs
 by (signature) David Duggill

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.