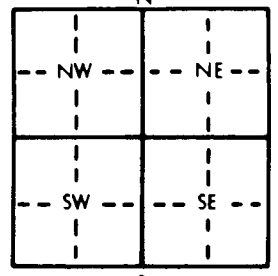


# Hole pluggings

1 LOCATION OF WATER WELL: County: <b>Wyandotte</b>	Fraction: <b>NW ¼ SW ¼ NE ¼</b>	Section Number: <b>1</b>	Township Number: <b>T 11 S</b>	Range Number: <b>R 23 E/W</b>
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Distance and direction from nearest town or city street address of well if located within city?  
**400ft S of 99th Parrall, Kansas city Kansas**

2 WATER WELL OWNER: <b>William Phillips</b>	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box #: <b>9949 Parrall</b>	
City, State, ZIP Code: <b>McK 66109</b>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: <b>26</b> ft. ELEVATION: Depth(s) Groundwater Encountered: 1. <b>NA</b> ft. 2. .... ft. 3. .... ft. WELL'S STATIC WATER LEVEL: <b>NA</b> ft. below land surface measured on mo/day/yr Pump test data: Well water was .... ft. after .... hours pumping .... gpm Est. Yield .... gpm: Well water was .... ft. after .... hours pumping .... gpm Bore Hole Diameter .... in. to .... ft., and .... in. to .... ft. WELL WATER TO BE USED AS: <b>NA</b> 1 Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below) 2 Irrigation    4 Industrial    7 Lawn and garden only    10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No	
		TYPE OF BLANK CASING USED: <b>NA</b> 1 Steel    3 RMP (SR) 2 PVC    4 ABS Blank casing diameter .... in. to .... ft., Dia .... in. to .... ft., Dia .... in. to .... ft. Casing height above land surface .... in., weight .... lbs./ft. Wall thickness or gauge No. ....
		TYPE OF SCREEN OR PERFORATION MATERIAL: <b>NA</b> 1 Steel    3 Stainless steel    5 Fiberglass    8 RMP (SR) 2 Brass    4 Galvanized steel    6 Concrete tile    9 ABS SCREEN OR PERFORATION OPENINGS ARE: <b>NA</b> 1 Continuous slot    3 Mill slot    6 Wire wrapped    9 Drilled holes 2 Louvered shutter    4 Key punched    7 Torch cut    10 Other (specify) ....

5 CASING JOINTS: Glued .... Clamped .... Welded .... Threaded .....
GRAVEL PACK INTERVALS: <b>NA</b> From .... ft. to .... ft., From .... ft. to .... ft.
6 GROUT MATERIAL: 1 Neat cement    2 Cement grout <u>3 Bentonite</u> 4 Other .....
Grout Intervals: From .... ft. to .... ft., From .... ft. to .... ft., From .... ft. to .... ft.
What is the nearest source of possible contamination: 1 Septic tank    4 Lateral lines    7 Pit privy    10 Livestock pens    14 Abandoned water well 2 Sewer lines    5 Cess pool    8 Sewage lagoon    11 Fuel storage    15 Oil well/Gas well 3 Watertight sewer lines    6 Seepage pit    9 Feedyard    12 Fertilizer storage    16 Other (specify below) 13 Insecticide storage .....
Direction from well? .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			<b>0</b>	<b>3</b>	<b>dir 4</b>
			<b>3</b>	<b>6</b>	<b>Bentonite</b>
			<b>6</b>	<b>26</b>	<b>Compacted Inorganic clay</b>

*plus well*

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>8-21-98</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>174</b> This Water Well Record was completed on (mo/day/year) <b>8-21-98</b> under the business name of <b>Brewer inc</b> by (signature) <b>Paul Brewer</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.