

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																								
	County: <u>WYANDOTTE</u>	<u>NW 1/4 SW 1/4 SE 1/4</u>	<u>15</u>	<u>11</u>	<u>74E</u>																								
Distance and direction from nearest town or city street address of well if located within city? <u>6111 BERGER AVE. KANSAS CITY, KS</u>																													
2	WATER WELL OWNER: <u>CONVOY LEASING, INC.</u>																												
RR #, St. Address, Box #:		Board of Agriculture, Division of Water Resources																											
City, State, ZIP Code: <u>KANSAS CITY, KS 64117</u>		Application Number:																											
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL <u>17.5</u> ft.																										
<div style="text-align:center">N</div> <table border="1" style="margin:auto"><tr><td></td><td></td><td></td></tr><tr><td>NW</td><td></td><td>NE</td></tr><tr><td></td><td></td><td></td></tr><tr><td>SW</td><td></td><td>SE</td></tr><tr><td></td><td></td><td></td></tr></table> <div style="text-align:center">S</div>						NW		NE				SW		SE				WELL'S STATIC WATER LEVEL <u>13.40</u> ft.											
			NW		NE																								
SW		SE																											
			WELL WAS USED AS:																										
			<table><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>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	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	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 <input checked="" type="checkbox"/>																										
			If yes, mo/day/yr sample was submitted																										
			Water Well Disinfected: Yes No <input checked="" type="checkbox"/>																										
5	TYPE OF BLANK CASING USED:																												
<table><tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other (Specify below)</td></tr><tr><td>2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr></table>						1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile															
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 <u>2.375</u> in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much																													
Casing height above or below land surface <u>N/A</u> in.																													
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>SOILS</u>																												
Grout Plug Intervals: From <u>17.5</u> ft. to <u>3</u> ft., From <u>3</u> ft. to <u>0</u> ft., From to ft.																													
What is the nearest source of possible contamination:																													
<table><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel storage (FURNACE)</td><td>16 Other (specify below)</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td><td></td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td><td></td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td><td></td></tr><tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well/Gas well</td><td></td></tr></table>						1 Septic tank	6 Seepage pit	11 Fuel storage (FURNACE)	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					
1 Septic tank	6 Seepage pit	11 Fuel storage (FURNACE)	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? <u>N/A</u> How many feet? <u>0</u>																													
<table border="1"><thead><tr><th>FROM</th><th>TO</th><th>PLUGGING MATERIALS</th></tr></thead><tbody><tr><td><u>0</u></td><td><u>3</u></td><td><u>COMPACTED SOILS</u></td></tr><tr><td><u>3</u></td><td><u>17.5</u></td><td><u>BENTONITE CHIPS</u></td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	PLUGGING MATERIALS	<u>0</u>	<u>3</u>	<u>COMPACTED SOILS</u>	<u>3</u>	<u>17.5</u>	<u>BENTONITE CHIPS</u>															
FROM	TO	PLUGGING MATERIALS																											
<u>0</u>	<u>3</u>	<u>COMPACTED SOILS</u>																											
<u>3</u>	<u>17.5</u>	<u>BENTONITE CHIPS</u>																											
7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>11461</u> under the business name of <u>QUAD STATE SERVICES, INC.</u> This Water Well Record was completed on (mo/day/year)																												
by (signature) <u>[Signature]</u>																													
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: 785/296-3565. Send one to Water Well Owner and retain one for your records.																													