

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																
County: Wyandotte		SE ¼ SE ¼ NW ¼	5	11	24-East																																
Distance and direction from nearest town or city street address of well if located within city? 1700 N. 82nd Street, Kansas City, Kansas																																					
2 WATER WELL OWNER: Alex R. Masson																																					
RR#, St. Address, Box # P.O. Box 170																																					
City, State, ZIP Code : Linwood, Kansas 66052																																					
Board of Agriculture, Division of Water Resources Application Number:																																					
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 20.0 ft.																																			
<div style="text-align: center;">N <table border="1" style="margin: auto; border-collapse: collapse;"><tr><td colspan="2">NW</td><td colspan="2">NE</td></tr><tr><td style="text-align: center;">X</td><td></td><td></td><td></td></tr><tr><td colspan="2">SW</td><td colspan="2">SE</td></tr></table> S</div>		NW		NE		X				SW		SE		WELL'S STATIC WATER LEVEL 10.97 ft.																							
		NW		NE																																	
		X																																			
		SW		SE																																	
WELL WAS USED AS:																																					
<div style="display: flex; justify-content: space-between;"><div><div>1 Domestic</div><div>2 Irrigation</div><div>3 Feedlot</div><div>4 Industrial</div></div><div><div>5 Public Water Supply</div><div>6 Oil Field Water Supply</div><div>7 Lawn and Garden (domestic)</div><div>8 Air Conditioning</div></div><div><div><input checked="" type="radio"/> 9 Dewatering</div><div><input checked="" type="radio"/> 10 Monitoring Well</div><div>11 Injection Well</div><div>12 Other</div></div></div>																																					
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:																																					
<div style="display: flex; justify-content: space-between;"><div>1 Steel</div><div>3 RMP (SR)</div><div>5 Wrought</div><div>7 Fiberglass</div><div>9 Other (specify below)</div></div>																																					
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="radio"/> 2 PVC</div><div>4 ABC</div><div>6 Asbestos-Cement</div><div>8 Concrete Tile</div></div>																																					
Blank casing diameter 2.375 in. Was casing pulled? Yes ___ No X If yes, how much? N/A																																					
Casing height above or below land surface Unknown in. Casing plugged; casing removed to depth of 3' BTOC.																																					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite <input checked="" type="radio"/> 4 Other Soils																																					
Grout Plug Intervals From 20.0 ft. to 3.0 ft. From 3.0 ft. to 0.0 ft. From _____ ft. to _____ ft.																																					
What is the nearest source of possible contamination:																																					
<div style="display: flex; justify-content: space-between;"><div><div>1 Septic tank</div><div>2 Sewer lines</div><div>3 Watertight sewer lines</div><div>4 Lateral lines</div><div>5 Cess Pool</div></div><div><div>6 Seepage pit</div><div>7 Pit privy</div><div>8 Sewage lagoon</div><div>9 Feedyard</div><div>10 Livestock pens</div></div><div><div><input checked="" type="radio"/> 11 Fuel storage (former)</div><div>12 Fertilizer storage</div><div>13 Insecticide storage</div><div>14 Abandoned water well</div><div>15 Oil well/ Gas well</div></div><div><div>16 Other (specify below)</div></div></div>																																					
Direction from well? N/A How many feet? 0																																					
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="width:15%;">FROM</th><th style="width:15%;">TO</th><th style="width:15%;">CODE</th><th style="width:55%;">PLUGGING MATERIALS</th></tr></thead><tbody><tr><td>0.0</td><td>3.0</td><td></td><td>Compacted soils</td></tr><tr><td>3.0</td><td>20.0</td><td></td><td>Bentonite chips</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	CODE	PLUGGING MATERIALS	0.0	3.0		Compacted soils	3.0	20.0		Bentonite chips																				
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 07/30/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 09/21/07 under the business name of Quad State Services, Inc. by (signature) <i>[Signature]</i>																																					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																					