

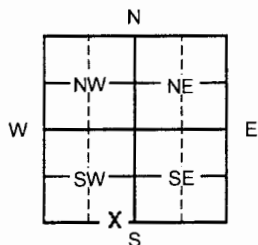
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Wyandotte	SE ¼ SE ¼ SW ¼	15	11	24 E DRL

Distance and direction from nearest town or city street address of well if located within city?

6700 Kaw Dr., Kansas City, KS 66111

2 WATER WELL OWNER: Carole Smith	Global Positioning System (decimal degrees, min. of 4 digits)
RR#, St. Address, Box #: 6191E. Eastman Ave.	Latitude: NA
City, State, ZIP Code: Denver, CO 80222	Longitude: NA
	Elevation: NA
	Datum: NA
	Data Collection Method: NA

3 MARK WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF WELL 29.81 ft. MW14

WELL'S STATIC WATER LEVEL NA ft.

WELL WAS USED AS:

- | | | |
|--------------|----------------------------|-------------------|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring |
| 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

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 ___ No ___ If yes, how much 3ft
Casing height above or below land surface ___ in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Asphalt: 0-0.3; Soil: 0.3-3

Grout Plug Intervals: From ___ ft. to ___ ft., From ___ ft. to ___ 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 | |
| 4 Lateral lines | 9 Feedyard | 14 Abandoned water well | Direction from well? |
| 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | How many feet? |

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	0.3	Asphalt			
0.3	3	Soil			
3	29.81	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2/27/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 3/20/12 under the business name of Larsen and Associates, Inc. by (signature) [Signature]

INSTRUCTIONS: Please fill in blanks 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. Visit us at <http://www.kdheks.gov/waterwell>.