

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																				
County: <u>Wyandott</u>		<u>SW 1/4 SW 1/4 SE 1/4</u>	<u>16</u>	<u>T11S</u>	<u>R25E</u>																																				
Distance and direction from nearest town or city street address of well if located within city? <u>541 S. 17th Street Kansas City, Kansas</u>																																									
2 WATER WELL OWNER: <u>Keystone Construction Company Inc.</u>																																									
RR #, St. Address, Box #: <u>2400 Allen Terrace</u>			Board of Agriculture, Division of Water Resources																																						
City, State, ZIP Code: <u>Kansas City Missouri 64108</u>			Application Number: _____																																						
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL <u>13</u> ft.																																							
		WELL'S STATIC WATER LEVEL <u>4.97</u> 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 <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:																																									
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</u> in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/> If yes, how much _____																																									
Casing height above or below land surface <u>2.64</u> in.																																									
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																									
Grout Plug Intervals: From <u>0</u> ft. to <u>13</u> 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																																					
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																																					
16 Other (specify below) <u>Former UST Basin</u>																																									
Direction from well? <u>On top of</u> How many feet? <u>0</u>																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>11</u></td> <td><u>Bentonite (8")</u></td> </tr> <tr> <td><u>11</u></td> <td><u>13</u></td> <td><u>Bentonite (2")</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> <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>11</u>	<u>Bentonite (8")</u>	<u>11</u>	<u>13</u>	<u>Bentonite (2")</u>																											
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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/year) <u>12/7/00</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>527</u> This Water Well Record was completed on (mo/day/year) <u>12/28/00</u> under the business name of <u>General Services, Inc.</u> 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.