

1	LOCATION OF WATER WELL: County: <u>Wyandotte</u>	Fraction <u>SW 1/4 SW 1/4 SE 1/4</u>	Section Number <u>16</u>	Township Number <u>T 11S</u>	Range Number <u>R 25 E</u>																											
Distance and direction from nearest town or city street address of well if located within city? <u>541 S. 11TH Street Kansas City Kansas</u>																																
2	WATER WELL OWNER: <u>Keystone Construction Company Inc.</u>																															
RR #, St. Address, Box #: <u>2400 Allen Terrace</u> City, State, ZIP Code: <u>Kansas City, Missouri 64108</u>			Board of Agriculture, Division of Water Resources Application Number:																													
3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:																															
		4			DEPTH OF WELL <u>30</u> ft. WELL'S STATIC WATER LEVEL <u>22.89</u> ft. WELL WAS USED AS: <table style="width:100%;"> <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															
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Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> <u>✓</u> If yes, mo/day/yr sample was submitted																																
Water Well Disinfected: Yes No <input checked="" type="checkbox"/> <u>✓</u>																																
5	TYPE OF BLANK CASING USED:																															
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Blank casing diameter <u>2</u> in. Was casing pulled? Yes No <input checked="" type="checkbox"/> <u>✓</u> If yes, how much																																
Casing height above or below land surface <u>2.56</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>30</u> ft., From ft. to ft., From to ft.																																
What is the nearest source of possible contamination:																																
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Direction from well? <u>West</u> How many feet? <u>80</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>12/1/00</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>327</u> This Water Well Record was completed on (mo/day/year) <u>12/28/00</u> under the business name of <u>Geotek 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.																																