

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number																																				
County: <b>Wyandotte</b>	<b>NE 1/4 NE 1/4 SE 1/4</b>	<b>34</b>	<b>11</b>	<b>25-East</b>																																				
Distance and direction from nearest town or city street address of well if located within city? <b>2313 W. 43<sup>rd</sup> Street, Kansas City, Kansas</b>																																								
2 WATER WELL OWNER: <b>Beverly Gates</b>																																								
RR#, St. Address, Box # <b>10115 Wenonga Lane</b>																																								
City, State, ZIP Code : <b>Leawood, Kansas 66206</b>																																								
Board of Agriculture, Division of Water Resources Application Number:																																								
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <b>26.0</b> ft.																																							
	WELL'S STATIC WATER LEVEL <b>17.56</b> 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 Lawn and Garden (domestic)                    11 Injection Well 4 Industrial                    8 Air Conditioning                    12 Other _____																																							
	Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No <b>X</b>																																							
5 TYPE OF BLANK CASING USED:																																								
1 Steel                      3 RMP (SR)                      5 Wrought                      7 Fiberglass                      9 Other (specify below) 2 PVC                      4 ABC                      6 Asbestos-Cement                      8 Concrete Tile																																								
Blank casing diameter <b>2.375</b> in. Was casing pulled? Yes <b>X</b> No _____ If yes, how much? <b>26'</b>																																								
Casing height above or below land surface <b>Unknown</b> in. <b>Well overdrilled to 20'</b>																																								
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <b>Soils</b>																																								
Grout Plug Intervals From <b>20.0</b> ft. to <b>3.0</b> ft. From <b>3.0</b> ft. to <b>0.0</b> ft. From _____ ft. to _____ ft.																																								
What is the nearest source of possible contamination:																																								
1 Septic tank                      6 Seepage pit                      11 Fuel storage (Former)                      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? <b>N/A</b> How many feet? <b>0</b>																																								
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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) <b>08/06/04</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>692</b> This Water Well Record was completed on (mo/day/yr) <b>08/09/04</b> under the business name of <b>Quad State Services, Inc.</b> by (signature) _____																																								
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.																																								