

1	LOCATION OF WATER WELL: Wyandotte County:	Fraction SE SW SW SW SE SW	Section Number 16	Township Number 11S	Range Number 25	EW
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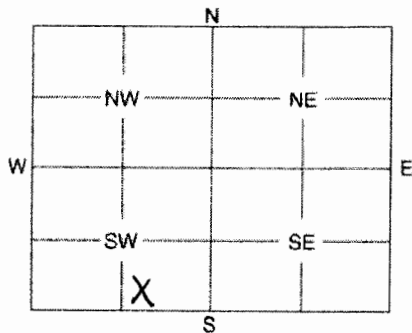
Distance and direction from nearest town or city street address of well if located within city?
508 S. 14th Street, Kansas City, Ks

2 WATER WELL OWNER: **Dart Transit**

RR #, St. Address, Box #: **P.O. Box 64110**
 City, State, ZIP Code : **St. Paul, MN 55164**

Board of Agriculture, Division of Water Resources
 Application Number:

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



4 DEPTH OF WELL **39.5** ft.

WELL'S STATIC WATER LEVEL **32.15** 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 **X**
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: 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 **2** in. Was casing pulled? Yes **X** No If yes, how much **20'**
 Casing height above or below land surface removed in.

6 GROUT PLUG MATERIAL: **3** 1 Neat cement 2 Cement grout **3** Bentonite **4** Other **Surface silts and clays**
 Grout Plug Intervals: From **20'** ft. to **3** ft., From **3** ft. to **0** ft., From 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 | |
| 5 Cess pool | 10 Livestock pens | 15 Oil well/Gas well | |

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
0	3	Gravel, dirt, concrete
20	3	Bentonite

RECEIVED
 SEP 09 2004
 BUREAU OF WATER

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) **08/25/04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/year) **08/30/04** under the business name of **Associated Environmental, Inc.**
 by (signature) **Dart Duncan**

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, 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.