

1

LOCATION OF WATER WELL:

Fraction

Section

Number

Township

Number

Range

Number

County: Wyandotte

SW 1/4 NE 1/4 NE 1/4

33

11

25

EW

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

Lat. 39.05688 N

Long. -94.63311 W

2

WATER WELL OWNER:

RR #, St. Address, Box #:

City, State, ZIP Code :

DS Waters

Sister, Oregon

97759

Board of Agriculture / Division of Water Resources

Application Number:

3

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

4

DEPTH OF WELL

ft.

21.5

WELL'S STATIC WATER LEVEL

ft.

14

WELL WAS USED AS:

1 Domestic

2 Irrigation

3 Feedlot

4 Industrial

5 Public Water Supply

6 Oil Field Water Supply

7 Domestic (Lawn & Garden)

8 Air Conditioning

9 Dewatering

10 Monitoring Well

11 Injection Well

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

NA

5

TYPE OF BLANK CASING USED:

1 Steel

2 PVC

3 RMP (SR)

4 ABS

5 Wrought

6 Asbestos-Cement

7 Fiberglass

8 Concrete Tile

9 Other (Specify below)

Blank casing diameter

in.

2

Was casing pulled? Yes

No

X

If yes, how much

21.0

Casing height above or below land surface

in.

2' 6"

6

GROUT PLUG MATERIAL:

1 Neat cement

2 Cement grout

3 Bentonite

4 Other

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

2 Sewer lines

3 Watertight sewer lines

4 Lateral lines

5 Cess pool

6 Seepage pit

7 Pit privy

8 Sewage lagoon

9 Feedyard

10 Livestock pens

11 Fuel storage

12 Fertilizer storage

13 Insecticide storage

14 Abandoned water well

15 Oil well/Gas well

16 Other (specify below)

Direction from well?

How many feet?

FROM

TO

PLUGGING MATERIALS

21.0

3.0

bentonite chips - hydrated

3.0

0.0

cl - gravel backfill

7

CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)

5-9-05

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.

614

This Water Well Record was completed on (mo/day/year)

under the business name of

MAXIM

by (signature)

William Steffens

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.