

1	LOCATION OF WATER WELL: County: <u>Geary</u>	Fraction <u>* See Below</u> <u>NE 1/4 NW 1/4 NW 1/4</u>	Section Number <u>14</u>	Township Number <u>11</u>	Range Number <u>6E</u>
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Distance and direction from nearest town or city street address of well if located within city?
Bldg 2338 Camp Forsyth Ft. Riley KS (See Attached Drawing)

2	WATER WELL OWNER: <u>U.S. Army Corps of Engineers</u> WELL # <u>TS0592-01</u>
RR#, St. Address, Box #:	<u>601 E. 12th St.</u>
City, State, ZIP Code :	<u>KANSAS City MO 64106</u>
Board of Agriculture, Division of Water Resources	Application Number:

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N																								
<table border="1"> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>N W</td> <td></td> <td>N E</td> </tr> <tr> <td>W</td> <td></td> <td></td> <td>E</td> </tr> <tr> <td></td> <td>S W</td> <td></td> <td>S E</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>S</td> </tr> </table>							N W		N E	W			E		S W		S E								S
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4	DEPTH OF WELL..... <u>24.0</u>ft.												
	WELL'S STATIC WATER LEVEL..... <u>18.6</u>ft.												
	WELL WAS USED AS:												
	<table border="0"> <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><u>10</u> Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden Only</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	<u>10</u> Monitoring Well	3 Feedlot	7 Lawn and Garden Only	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"/> No												
	If yes, mo/day/yr sample was submitted.....												
	Water Well Disinfected: Yes..... <input checked="" type="checkbox"/> No.....												

5	TYPE OF BLANK CASING USED:										
	<table border="0"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (specify below)</td> </tr> <tr> <td><u>2</u> PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td>.....</td> </tr> </table>	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	<u>2</u> PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile
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	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>Flush Mount</u>in. <u>Cover</u> <u>Casing Drilled out to 6'</u>										

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other.....																				
	Grout Plug Intervals: From <u>24</u> ft. to <u>1</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>N.W.</u> How many feet? <u>± 40'</u>																				

FROM	TO	PLUGGING MATERIALS
<u>24</u>	<u>1</u>	<u>Bentonite Chips</u>
<u>1</u>	<u>0</u>	<u>Compacted Soil</u>

* Ft. Riley Coordinates
N 267,407.6
E 2,334,025.4
Elev 1068.1

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)..... <u>4/16/98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>S.D.</u> This Water Well Record was completed on (mo/day/year)..... <u>5/28/98</u> under the business name of <u>MIKAN Corporation</u> by (signature) <u>David Beaman</u>
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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: 913/296-3565. Send one to Water Well Owner and retain one for your records.