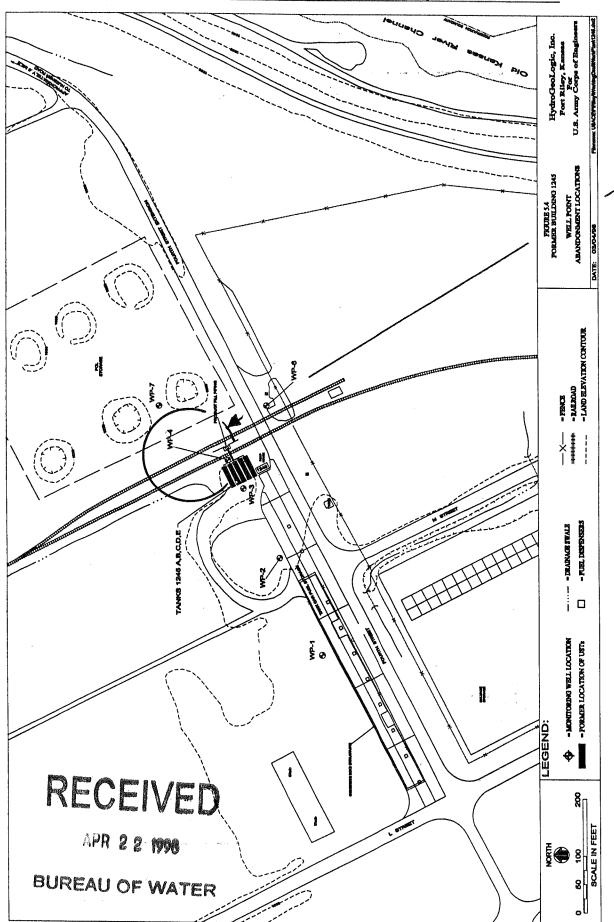
one for your records.

1 LOCATION	I OF WATER	USII .	Fraction		Sect	ion Number	Township	Number	Pan	ao Numbon
1 LOCATION OF WATER WELL:				€1// 1//			1 Ownship	Number	Range Number	
GAMICK 200 110										
Port Rusy KS Camp Fow Tow Form Rus 1245 WP. 4										
2 WATER WELL OWNER: US ARMY CORPS OR ENGINEERS										
RR#, St. Address, Box #: 601 E. 1278 ST City, State, ZIP Code: KC, Mo. 64106 Board of Agriculture, Division of Water Resources Application Number:										
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL										
COL		n nan	WELL V	AS USED AS:	:					
N N	3 7111	M E	1 0	Oomestic	5 Pul	olic Water Supp	oly 9	Dewatering		
0 W	G		2 1 3 F	(rrigation =eedlot	6 0i 7 Lai	Field Water S wn and Garden (Conditioning	Onlv 11	Monitoring Injection	Well	
W			E 4 1	Industrial	8 Ai	· Conditioning	12	Other Pl	5 2 0!	veici.
Was a chemical/bacteriological sample submitted to Departm If yes, mo/day/yr sample was submitted									t? Yes	No.X.
	Water Well Disinfected: Yes No.X									
	S		water we			· · · · · · · · · · · · · · · · · · ·	ulio a e			
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 diameterin. Was casing pulled? YesX. No If yes, how much a casing height above or below land surface.										
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout Plug Intervals: Fromft. toft., Fromft. toft., From										
What is the nearest source of possible contamination:										
1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify k 2 Sewer lines 7 Pit privy 12 Fertilizer storage								below)		
<pre>2 Sewer lines 3 Watertight sewer lines</pre>							FORMER			
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							3			
Direction from well? How many feet?										
FROM	то	PL	UGGING MATER	RIALS						
73	3	h and the	a iti	24 4 4 1 1						
30			outis s							
		1M110G	. 2007 L	·Cray						
		· · · · · · · · · · · · · · · · · · ·	***************************************							
		and C	00							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed										
on (mo/day/year)										
Water Well Contractor's License No										
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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										



FORMER BLOGS 1245

PIEZONETER

U.S. Army Corps of Engineers-Kansas City District