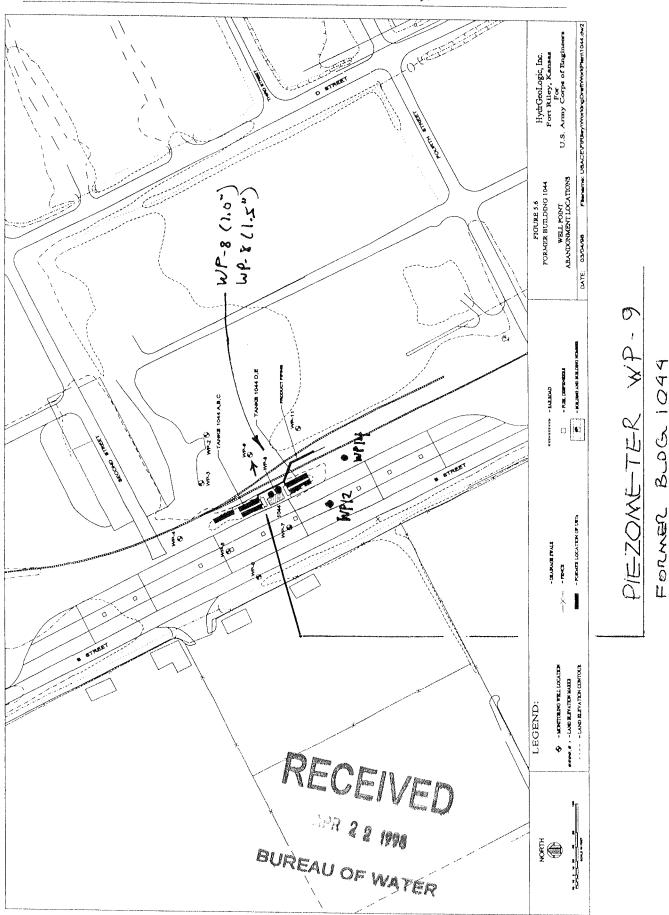
-				-	***************************************
1 LOCATION	OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: GERNY SW1/4NB1/4 1/4 3/ 11 S					6 6
Distance and direction from nearest town or city street address of well if located within city?  FT RICEY IS COMP FUNCTON FORMEN BLDG 1044 WP-9					
2 WATER WELL OWNER: US ANTHY CORRS & GNG/AGENS  RR# St Address Box #: GO   E   Z IH ST    Roard of Agriculture, Division of Water Resources					
City, State, ZIP Code: KC, MO 6406 Application Number:					
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL. 24.,					
WELL WAS USED AS:					
N V	7 2 GG	1 Domestic	5 Public Water Sup		
W ATT	mchao	2 Irrigation 3 Feedlot E 4 Industrial	6 Oil Field Water 7 Lawn and Garden 8 Air Conditioning	Only 11 Injecti	on Well
	' G   S E-	Was a chemical/bac	teriological sample s	PIEZONA ubmitted to Departm	× I
If yes, mo/day/yr sample was submitted					
	s	——— Water Well Disinfe	cted: Yes No.		
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? Yes No If yes, how much					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Plug Intervals: From 2.1.ft. toft., Fromft. toft., From toft.					
What is the nearest source of possible contamination:					
1 Septic tank 6 Seepage pit 2 Sewer lines 7 Pit privy 3 Watertight sewer lines 8 Sewage lagoon 4 Lateral lines 9 Feedyard 5 Cess Pool 10 Livestock pens			11 Fuel storage 12 Fertilizer stora 13 Insecticide stor 14 Abandoned water 15 Oil well/Gas wel	ge age FONTW well	
Direction from well? How many feet?					
FROM	то	PLUGGING MATERIALS			
24	3 Q.	Arden		GEOPRE	one Groot s u u sed
3	00	en the Noting	Soll	MACHINE	5 4
		0		IN6~1	USed
		· · · · · · · · · · · · · · · · · · ·			
7 CONTRACTOR OF LANDON WER OF GERTYFICATION This was a second of the sec					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)					
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.					



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