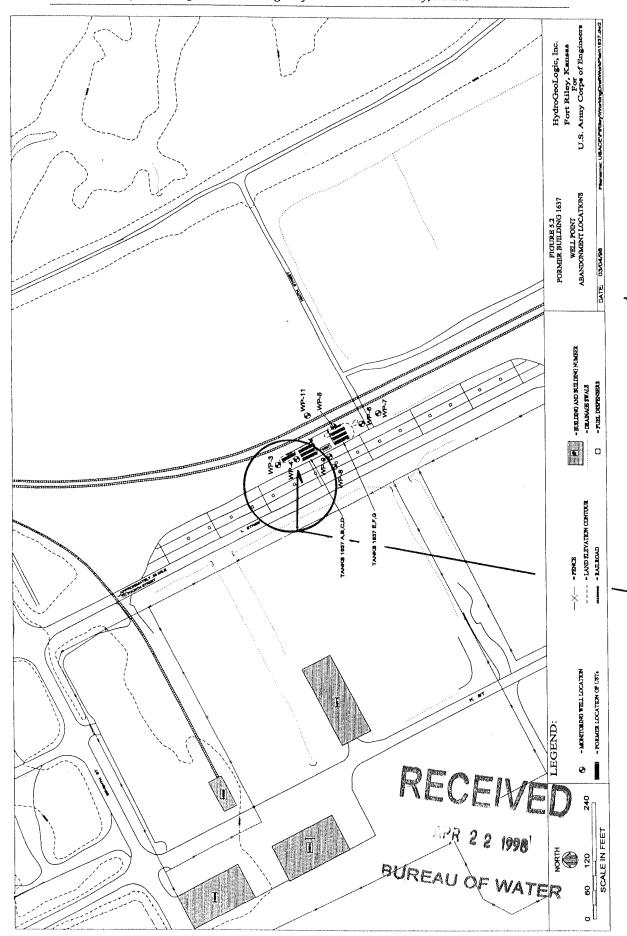
						***************************************			-	
1 LOCATION OF WATER WELL:			Fraction		Section Number	Townshi	p Number	Ran	ge Number	
County:	ABBINA 1910A		SW114 NW14	1/4	3/		5	6	3	
PORT RICH KS CAMP FUNTON FORM BLOG 1637 WP- & 4										
2 WATER WELL OWNER: V US ARMY CORPS & ENGINEERS  RR# St. Address Box #: 601 8 1278 ST.  Roard of Agriculture, Division of Water Resources										
City, State, ZIP Code: KC MO 64106 Application Number:										
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:  N  WELL'S STATIC WATER LEVEL 2.2. S										
PLE	ASU S	GE	WELL WAS US	ED AS:						
D W	SCHER CA	N E	1 Domest 2 Irriga 3 Feedlo E 4 Indust	tion t rial	5 Public Water Sup 6 Oil Field Water 9 7 Lawn and Garden 0 8 Air Conditioning	Supply Only	9 Dewaterin 10 Monitorin 11 Injection 12 Other	g Well Well	3U ~	
s 	S'W————————————————————————————————————									
	Water Well Disinfected: Yes No.									
5 TYPE OF	BLANK CAS	ING USED:	A STATE OF THE STA							
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 3.7ft. toft., Fromft. toft., From toft.										
What is the nearest source of possible contamination:										
2 Sewer lines 7 3 Watertight sewer lines 8 4 Lateral lines 9			6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pen		11 Fuel storage 12 Fertilizer storag 13 Insecticide stora 14 Abandoned water of 15 Oil well/Gas wel	ge age <i>(</i> well	16 Other (sp この八いさ ちょてど	N (	below)	
Directi	Direction from well?									
FROM	то	PL.	UGGING MATERIALS							
23.7	3	bent	o.th		- GEOM	0B3	Canos	T 0	ran D	
3	0	CLIPCY	-NATIVES	Lio.	z w ta	3V-1 1	15.13			
		(			Z W THE	MIN	- ABM	70 W	imalt	
						•	,р			
***************************************										
					ar yang distribution and management of the second s					
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year). 4 - 10 - 1.3 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year)										
underline Bureau of	or circle	the correct eka, Kansas	answers. Send t	op thr	se press firmly and ee copies to Kansas e: 913/296-3565. S	Departmen	t of Health	and Er	nvironment,	

Report of the



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