

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Shawnee	NE ¼ NE ¼ NW ¼	14	12	15-East

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

3101 SW 29th Street, Topeka, Kansas

2 WATER WELL OWNER: Kent Lindemuth	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # 4350 Greenhills Place	
City, State, ZIP Code : Topeka, Kansas 66618	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 14.0 ft.												
<div style="text-align: center;">N W E SW SE S</div>	WELL'S STATIC WATER LEVEL N/A ft. Well obstructed within casing												
	WELL WAS USED AS: <table><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>10 Monitoring Well</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden (domestic)</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	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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	Was a chemical/bacteriological sample submitted to Department? Yes _____ No X												
	If yes, mo/day/yr sample was submitted _____												
	Water Well Disinfected: Yes _____ No X												

5 TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)
2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile
Blank casing diameter 2.375 in. Was casing pulled? Yes X No _____ If yes, how much? 14.0'
Casing height above or below land surface Unknown in. Overdrilled well to 14.0'

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other	Soils/Concrete
Grout Plug Intervals	From 14.0 ft. to 3.0 ft.	From 3.0 ft. to 1.0 ft.	From 1.0 ft. to 0.0 ft.		

What is the nearest source of possible contamination:

- | | | | |
|--------------------------|-------------------|-------------------------|--------------------------|
| 1 Septic tank | 6 Seepage pit | 1 Fuel storage | 16 Other (specify below) |
| 2 Sewer lines | 7 Pit privy | 12 Fertilizer storage | |
| 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 | |

Direction from well? **West** How many feet? **20**

FROM	TO	CODE	PLUGGING MATERIALS
0.0	1.0		Concrete
1.0	3.0		Compacted soils
3.0	14.0		Bentonite chips

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 01/05/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 692 This Water Well Record was completed on (mo/day/yr) 01/08/07 under the business name of Quad State Services, Inc. by (signature) <i>[Signature]</i>

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.