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|---------------------------|-----------------------|----------------|-----------------|----------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: Shawnee | NE ¼ NE ¼ SE ¼ | 13 | 12 | 15-East |

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

330, Topeka Blvd, Topeka Kansas

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| 2 WATER WELL OWNER: Bellaire Shopping Center | Board of Agriculture, Division of Water Resources |
| RR#, St. Address, Box # 534 S Kansas Avenue Suite 925 | Application Number: |
| City, State, ZIP Code : Topeka, KS 66603 | |

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|---|--|---|-----------------------|--------------|--------------|--------------------------|---|-----------|------------------------------|-------------------|--------------|--------------------|
| 3 MARK WELL'S LOCATOR WITH AN "X" IN SECTION BOX: | 4 DEPTH OF WELL 15.0 ft. | | | | | | | | | | | |
| | WELL'S STATIC WATER LEVEL 3.90 ft. | | | | | | | | | | | |
| | WELL WAS USED AS: | | | | | | | | | | | |
| | <table style="width:100%;"> <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><input checked="" type="radio"/> 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 | <input checked="" type="radio"/> 10 Monitoring Well | 3 Feedlot | 7 Lawn and Garden (domestic) | 11 Injection Well | 4 Industrial | 8 Air Conditioning |
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| 3 Feedlot | 7 Lawn and Garden (domestic) | 11 Injection Well | | | | | | | | | | |
| 4 Industrial | 8 Air Conditioning | 12 Other _____ | | | | | | | | | | |
| | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> | | | | | | | | | | | |
| | If yes, mo/day/yr sample was submitted _____ | | | | | | | | | | | |
| | Water Well Disinfected: Yes _____ No <input checked="" type="checkbox"/> | | | | | | | | | | | |

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| 5 TYPE OF BLANK CASING USED: | | | |
| 1 Steel | 3 RMP (SR) | 5 Wrought | 7 Fiberglass |
| <input checked="" type="radio"/> 2 PVC | 4 ABC | 6 Asbestos-Cement | 8 Concrete Tile |
| Blank casing diameter 2.375 in. | | Was casing pulled? Yes <input checked="" type="checkbox"/> No _____ | If yes, how much? 3' |
| Casing height above or below land surface Unknown in. | | Overdrilled well to 3" | |

| | | | |
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| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite <input checked="" type="radio"/> 4 Other Asphalt | | | |
| Grout Plug Intervals From 15.0 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 | <input checked="" type="radio"/> 11 Fuel storage (former) | 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? **N/A** How many feet? **0**

| FROM | TO | CODE | PLUGGING MATERIALS |
|------------|-------------|------|------------------------|
| 0.0 | 1.0 | | Asphalt |
| 1.0 | 3.0 | | Soils |
| 3.0 | 15.0 | | Bentonite chips |
| | | | |
| | | | |
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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 04/23/08 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) 05/05.08 under the business name of Quad State Services, Inc. by (signature) <i>[Signature]</i> | |
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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.