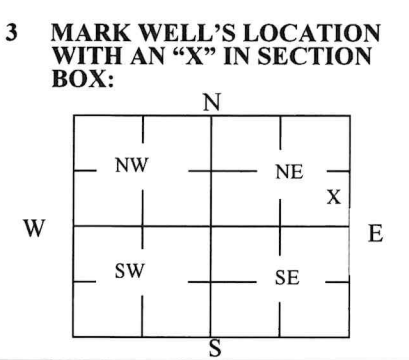


1 LOCATION OF WATER WELL: County: Shawnee	Fraction NE ¼ NE ¼ SE ¼ NE ¼	Section Number 36	Township Number T 12 S	Range Number R 15 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
------------------------------------------------------------	----------------------------------------	-----------------------------	----------------------------------	------------------------------------------------------------------------------------------------------------

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 416 SW 57th Street, Topeka, KS	Global Positioning Systems (GPS) information: Latitude: N 38.96753 (in decimal degrees) Longitude: W 95.68863 (in decimal degrees) Elevation: TOC: 1014.94; RIM: 1015.16 Horizontal Datum: <input checked="" type="checkbox"/> WGS84 , <input type="checkbox"/> NAD83 , <input type="checkbox"/> NAD27 Collection Method:
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2 WATER WELL OWNER: Lindemuth, Inc. (Pauline Farm RR#, St. Address, Box #: 125 SW Gage Blvd City, State ZIP Code: Topeka, KS 66606-2029	<input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input checked="" type="checkbox"/> Land Survey Est. Accuracy: <input checked="" type="checkbox"/> < 3 m , <input type="checkbox"/> 3-5 m , <input type="checkbox"/> 5-15 m , <input type="checkbox"/> > 15 m
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4 DEPTH OF WELL 3.09 **ft.**

WELL'S STATIC WATER LEVEL 1.56 **ft**

WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input checked="" type="checkbox"/> Monitoring
<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specify below) _____
<input type="checkbox"/> Steel	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 3.09 ft

Casing height above or below land surface .22 ft in.

6 GROUT PLUG MATERIAL: **Neat cement** **Cement grout** **Bentonite** **Other** _____

Grout Plug Intervals: From 3.09 ft. to 0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input checked="" type="checkbox"/> Fuel storage	<input type="checkbox"/> Other (specify below) _____
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input checked="" type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	.5	Topsoil/Grass seed			
.5	3.09	Neat Cement			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/24/2023 and this record is true to the **best of my knowledge and belief**. Kansas Water Well Contractor's License No. PG294. This Water Well Record was completed on (mo/day/year) 6/7/2023 under the business name of ppB enviro-solutions by (signature) *[Signature]*

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.