1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range No County: Douglas SE 1/4 SE 1/4 SW 1/4 25 12S 19E  Distance and direction from nearest town or city street address of well if located within city?	
Distance and direction from pagreet town or city etreet address of wall if laceted within simple	umbe
415 W. 6 <sup>th</sup> Lawrence. KS	
WATER WELL OWNER: Tom Benefiel/Unimart  Global Positioning System (decimal degrees, min. of 4 digits Latitude:	
RR#, St. Address, Box #: 10600 W 98 <sup>th</sup> Terrace  Longitude: Elevation:	
City, State, ZIP Code: Overland Park, KS, 66214 Datum:  Data Collection Method:	
MARK WELL'S LOCATON 4 DEPTH OF WELL 14.7 ft. MW6	
WITH AN "X" IN SECTION  BOX: WELL'S STATIC WATER LEVEL ft.	
N WELL WAS USED AS:	
NW NE Domestic 5 Public Water Supply 9 Dewatering	
W 2 Irrigation 6 Oil Field Water Supply 10 Monitoring 7 Domestic (Lawn & Garden) 11 Injection Well	
SW—SE—  4 Industrial 8 Air Conditioning 12 Other	
SW SE	
Was a chemical/bacteriological sample submitted to Department? YesNo	<u>X</u>
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 diameter 2 in. Was casing pulled? Yes X No If yes, how much 3ft  Casing height above or below land surface in.	
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Soil 0-3 ft	-
Grout Plug Intervals: From 3 ft. to 14.7 ft., From ft. to ft., From ft. to	ft
What is the people's course of pegaible contemination.	
What is the nearest source of possible contamination:  1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)	
2 Sewer lines 7 Pit privy 12 Fertilizer storage	
Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage	
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? 5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?	•
FROM TO PLUGGING MATERIALS FROM TO PLUGGING MATERIALS	
0 3 Soil	
3 14.7 Bentonite	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was	
mpleted on (mo/day/year) 9/5/09 and this record is true to the best of my knowledge and belief. Kansas W	
ell Contractor's License No. 757. This Water Well Record was completed (on (mo/day/year) 10/13/09 siness name of Larsen and Associates. Inc. by (signature)	under
STRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health ar vironment. Bureau of Water. Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone:	na
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