Form WWC-5P

KSA 82a-1212

IDNO. 00340579

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1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Douglas	NE4SE 4SW 4	19	125	20 E
Distance and direction from nearest town or				
1001 North 312	st. France K	<u> </u>		
2 WATER WELLOWNER: HERB	BEHLOW			
RR #, St. Address, Box #: City, State, ZIP Code : Lawrence, Kansa's Board of Agriculture, Division of Water Resources Application Number:				
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL			
WELL'S STATIC WATER LEVEL 4.95 ft.				
	WELL WAS USED AS:			
N W N E	1 Domestic	5 Public Water Suppl	y <u>9</u> Dewate	ering
	2 Irrigation	6 Oil Field Water Sup		ring Well
W E	3 Feedlot 4 Industrial	7 Domestic (Lawn & 8 Air Conditioning		on weii
Sw Sp Was a chemical / bacteriological sample submitted to Department?Yes				
S W S E Was a chemical / bacteriological sample submitted to Department? Yes				
Y Y				
S	Water Well Disinfected:	Yes No		
5 TYPE OF BLANK CASING USED:				
2PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile				
Blank casing diameter in. Casing height above obelow land s	Was casing pulled?	Yes No	If yes, how me	uch
6 GROUT PLUG MATERIAL: 1 Ne	at cement	Bentonite 4 0	ther	
Grout Plug Intervals: From				
		, 1,10111		
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)				acify halow)
2 Sewer lines	7 Pit privy	12 Fertilizer storage	······	
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide stora		
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned wate15 Oil well/Gas well		
Direction from well? NE		y feet? unknown		
FROM TO PLUG	GGING MATERIALS			
4.5 10 comint	6 - 1		-	CEIVED
			RE	CEIVED
2.5 4.5 Busto			nca	T 0 7 2004
0 2.5 Com	+ SOIL			
			BURE/	AU OF WATER

7 CONTRACTOR'S OR LANDOWNE	R'S CERTIFICATION: Th	is water well was plugge	d under my jurisdiction	and was completed
on (mo/day/year)	714	and this record is true This V	Nater Well Record was com	npleted on (mo/day/year)
Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) O7/29/04 under the business name of Environment Goods and Lengthern Street Contractor's License No.				
by (signature)				
INSTRUCTIONS: Use typewriter or ba	point pen. <u>Please press f</u>	irmly and print clearly. Plea	ase fill in blanks <u>,</u> underlir	ne or circle the correct
answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.				