

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: Johnson	NW 1/4 NW 1/4 NE 1/4	28		T	12	S	R 22
								(E) w

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

Approximately 1/4 mile north of DeSoto

2	WATER WELL OWNER:	City of Olathe	Board of Agriculture, Division of Water Resources
	RR#, St. Address, Box #	P.O. Box 768	Application Number:
	City, State, ZIP Code	Olathe, KS 66051-0768	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 46 ft
			WELL'S STATIC WATER LEVEL Not checked ft.
			WELL WAS USED AS:
		1 Domestic	5 Public Water Supply
		2 Irrigation	6 Oil Field Water Supply
		3 Feedlot	7 Domestic (Lawn & Garden)
		4 Industrial	8 Air Conditioning
			9 Dewatering
			10 Monitoring Well
			11 Injection Well
			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 <input checked="" type="checkbox"/> No	

5	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 No <input checked="" type="checkbox"/> If yes, how much
	Casing height above or below land surface 120 in.

6	GROUT PLUG MATERIAL:	1 Neat Cement	2 Cement grout	3 Bentonite	4 Other Bentonite Holeplug
	Grout Plug Intervals:	From ft. to ft.	From ft. to ft.	From 0 ft. to 46 ft.	
	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	None known	
	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?		How many feet?		

FROM	TO	PLUGGING MATERIALS
46	0	Bentonite Holeplug

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 11-08-06 and this record is true to the best of my knowledge and belief. Kansas
	Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 11-20-06 under the business name of Clarke Well & Equipment, Inc.
	by (signature) <i>Paul W. Clarke</i>

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health & Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.