

1	LOCATION OF WATER WELL:	Fraction	Section	Number	Township	Number	Range	Number
	County: <b>Leavenworth</b>	<b>SE 1/4 NW 1/4 NW 1/4</b>	<b>27</b>		<b>T</b>	<b>12</b>	<b>S</b>	<b>R 22</b>
Distance and direction from nearest town or city street address of well if located within city? <b>Approximately 1/8 mile north and 1/4 mile east of DeSoto</b>								

  

2	WATER WELL OWNER:	<b>City of Olathe</b> RR#, St. Address, Box # <b>P.O. Box 768</b> City, State, ZIP Code <b>Olathe, KS 66051-0768</b>	Board of Agriculture, Division of Water Resources Application Number:
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <b>60</b> ft WELL'S STATIC WATER LEVEL <b>30</b> ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div>           1 Domestic            2 Irrigation            3 Feedlot            4 Industrial         </div> <div>           5 Public Water Supply            6 Oil Field Water Supply            7 Domestic (Lawn &amp; Garden)            8 Air Conditioning         </div> <div>           9 Dewatering            10 Monitoring Well            11 Injection Well  <b>12 Other</b> <u>Observation</u> </div> </div> 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 _____
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5	TYPE OF BLANK CASING USED:	<div style="display: flex; justify-content: space-between;"> <div>           1 Steel  <b>2 PVC</b> </div> <div>           3 RMP (SR)            4 ABS         </div> <div>           5 Wrought            6 Asbestos-Cement         </div> <div>           7 Fiberglass            8 Concrete Tile         </div> <div>           9 Other (Specify below)         </div> </div> Blank casing diameter <b>2</b> in. Was casing pulled? Yes _____ No <input checked="" type="checkbox"/> Casing height above or <u>below</u> land surface <b>48</b> in. If yes, how much _____
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6	GROUT PLUG MATERIAL:	<div style="display: flex; justify-content: space-between;"> <div>           1 Neat Cement            Grout Plug Intervals: From _____ ft. to _____ ft.         </div> <div>           2 Cement grout            From _____ ft. to _____ ft.         </div> <div>           3 Bentonite            From _____ ft. to _____ ft.         </div> <div> <b>4 Other</b> <u>Bentonite Holeplug</u>            From <b>60</b> ft. to <b>4</b> ft.         </div> </div> What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div>           1 Septic tank            2 Sewer lines            3 Watertight sewer lines            4 Lateral lines            5 Cess Pool         </div> <div>           6 Seepage pit            7 Pit privy            8 Sewage lagoon            9 Feedyard            10 Livestock pens         </div> <div>           11 Fuel storage            12 Fertilizer storage            13 Insecticide storage            14 Abandoned water well            15 Oil well/Gas well         </div> <div> <b>16 Other (specify below)</b>  <u>None known</u> </div> </div> Direction from well? _____ How many feet? _____
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FROM	TO	PLUGGING MATERIALS
60	4	Bentonite Holeplug
4	0	Compacted Soil

  

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <b>03-20-07</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>185</b> This Water Well Record was completed on (mo/day/year) <b>03-23-07</b> under the business name of <b>Clarke Well &amp; Equipment, Inc.</b> by (signature) <i>Clarke W. Clarke</i>
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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.