KSA 82a-1212

LOCATION OF WATER WELL: Number Fraction Section Number Township Range Number Johnson 11 SW, SE , SE , 24 12**S** County: Distance and direction from nearest town or city street address of well if located within city? Zarda Dairy 10606 Shawnee Mission Parkway, Kansas City, Ks 2 WATER WELL OWNER: Mid American Dirymen RP #, St. Address, Box #: 3253 E. Chestnut Expressway Board of Agriculture, Division of Water Resources Application Number: City, State, ZIP Code Springfield, MO 65802 DEPTH OF WELL 12.51 ft. 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL .3.28..... ft. WELL WAS USED AS: 5 Public Water Supply 9 Dewatering 1 Domestic NW-NE 6 Oil Field Water Supply 10) Monitoring Well 2 Irrigation 7 Domestic (Lawn & Garden) 11 Injection Well 3 Feedlot Ε W 8 Air Conditioning 12 Other 4 Industrial SE SW If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No ...X..... TYPE OF BLANK CASING USED: Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Yes X If yes, how much ...13 Blank casing diameter in. Was casing pulled? No Casing height above or below land surface in. GROUT PLUG MATERIAL: 3 Bentonite 4 Other..... 1 Neat cement 2 Cement grout 6 Grout Plug Intervals: From13...... ft. to **Q**...... ft., From ft. to ft., From What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) 12 Fertilizer storage 2 Sewer lines 7 Pit privy 8 Sewage lagoon 3 Waterlight sewer lines 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 13 0 **Bentonite Grout** 7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/year) 10/10/05 under the business name 10/10/10/05. by (signature) Bradley J. Johnson Dy 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 and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.